8879-EO	IRS	e-file Signature Au or an Exempt Orga	thorization	A FLAN	CMB No. 1545-1879
		your beginning JUL 1 . 2012		-20	
Department of the Transury		Do not send to the IRS. Keep for			2019
Internal Revenue Service	► Go to	www.trs.gov/Form8879EO for th		Ser La serie 1	
Name of exempt organization	and the second second		A MARCH CHARLES CONTRACT	Employer Ideat	ification number
FIDELCO GUITDE	DOG FOUNDATIO	N TNC			
Name and title of officer	DOG FOORDATIC	A, INC		**_***(14/8
KAREN C. TRIP CEO		and a set of the			
		formation (Whole Dollars Onl		a to have a	
on une 18, 28, 38, 48, cr	5a, below, and the amount o	this Form 8879-EO and enter the a on that line for the return being file f you entered -0- on the return, the	d with this form was blan	k then leave line	th 2h 3h dh or 5h
1a Form 990 check here	► X b Total reve	enue, if any (Form 990, Part VIII, c	olumn (A), line 121		5.150 687.
2a Form 990-EZ check h	ere 🕨 🔟 b Total	revenue, if any (Form 990-EZ, Ine	9)	26	0/100/00/1
3a Form 1120-POL chec	khere 🕨 🛄 b Te	otal tax (Form 1120-POL, line 22)		35	
4a Form 990-PF check h	ere 🕨 🔄 b Taxb	ased on investment income (For	m 990-PF, Part VI, line 5)	46	and the second second
5a Form 8868 check her	e 🕨 🔄 b Balance (Due (Form 8868, line 3c)			
Part II Declara	tion and Signature Au	thorization of Officer		100	
(a) an acknowledgement of the date of any refund. If a debit) entry to the financial in 1-888-353-4537 no later the processing of the electron payment. I have selected organization's consent to Officer's PIN: check one	oer, transmitter, or electroni of receipt or reason for reject applicable, I authorize the U. I institution to debit the entry to asituation to debit the entry to asituation to debit the entry to asituation to debit taxes to receipt a personal identification nun electronic funds withdrawal.	ERO firm name	he organization's return t eason for any delay in pro sancial Agent to initiate au for payment of the organ ant, I must contact the U. Iso authorize the financial are to sneare invulsion	o the IRS and to re cessing the return n electronic funds v ization's federal tax S. Treasury Financi Il institutions involve red perceba issues of	ceive from the IRS or refund, and (c) withdrawal (direct kes owed on this ial Agent at ed in the elated to the cable, the
is being filed with	on the organization's tax ye h a state agency(ies) regulat the return's disclosure cons	ar 2019 electronically filed return. ting charities as part of the IRS Fe sent screen.	If I have indicated within d/State program, I also a	this return that a o uthorize the aforem	opy of the return tentioned ERO to
indicated within	the organization, I will enter this return that a copy of th nter my PIN on the return's o	my PIN as my signature on the org e return is being filed with a state disclosure consent screen.	janization's tax year 2019 agency(ies) regulating ch	9 electronically filed arities as part of th	i return. If I have e IRS Fed/State
Officer's signature 🕨			Date >	4.28-20	121
Part III Certifica	tion and Authenticati	00			
	ur six-digit electronic filing k				
number (EFIN) followed by	your five-digit self-selected	PIN.	0629880000 De not enter all zero		
certify that the above nur confirm that I am submitting a file Providers for Busines	ng this return in accordance	is my signature on the 2019 elect with the requirements of Pub. 41	ronically filed return for th	ne omanization ind	cated above. I Authorized IRS
	mas Goldfuss	Digitally signed by Thomas Goldfur Date: 2021.04.26 14:13:07 -04'00'	ss Date ►	11.12	
	ERO M Do Not Submit T	ust Retain This Form - Se his Form to the IRS Unles	e Instructions is Requested To De	So	
LHA For Paperwork Red	luction Act Notice, see inst			and the second	m 8879-EO (2019)

m y	90 Jary 2020)	Under section 501(c), 5	Organization Exempt F i27, or 4947(a)(1) of the Internal Revenue	Code (exc	ept private	foundations	2019
	the Treasury tax Service	Do not ent	ter social security numbers on this form a	is it may b	e made put	dic.	Open to Public
		Go to w	ww.irs.gov/Form990 for instructions and nning JUL 1, 2019 and		UN 30,		Inspection
Check #	in the second	organization		encing U		and the second second	ation number
	E. Constants				D Employ	in internation	abon number
Addres		LCO GUIDE DOG	FOUNDATION, INC	1.00	HE MARK		
Name change		usiness as			**-	***047	8
	Number	and street (or P.O. box if n VISION WAY	mail is not delivered to street address)	Room/suite	E Telepho		
tarran-					and the second se	-243-5	
			ountry, and ZIP or foreign postal code		G Gross roo		5,999,117
Applica	F Name an	nd address of principal of	ficer KAREN C. TRIPP	1.		a group ret	
pendin	SAME	AS C ABOVE		- 10			when Yes N
		X 501(c)(3) 501(c	:) () (insert no.) 4947(a)(1) o	r 527			st. (see instructions)
	the second se	FIDELCO.ORG		-	H(c) Group	exemption	number 🕨
	Summary	Corporation Tru	st Association Other >	I. Year o	of formation:	1962 M	State of legal domicile; C
_		the omanization's missi	on or most significant activities: PROMO	THE	THODEN		ORDERING STOR
	TO MEN A	AND WOMEN WHO	ARE BLIND BY PROVIDI	G THE	M WTTH	HTCHR	DEPENDENCE
2 (Check this box	if the organiz	ation discontinued its operations or dispose	ed of more	than 25% of	its net asse	ts.
3 1	Number of voti	ng members of the gover	ming body (Part VI, line 1a)			3	1
	Number of inde	spendent voting member	s of the governing body (Part VI, line 1b)			4	1
5 1	Total number o	f individuals employed in	calendar year 2019 (Part V, line 2a)			5	6
6	Total number o	f volunteers (estimate if r	tecessary)			6	Sec. 200 (1997)
1	ious unreizieo	Duarness revenue from F	Part VIII, column (C), line 12			7a	0
	vet unrelated c	usness taxable income t	from Form 990-T, line 39			75	0
8 0	Contributions a	and grants (Part VIII line)	1h)	-	Prior Ye 3,760		Current Year
9 F	Program servic	e revenue (Part VIII, line 2	20		the second s	,130.	4,694,561 20,081
10 h	nvestment inco	ome (Part Vill, column (A)), lines 3, 4, and 7d)		and the second se	,157.	353,611
11 0	Other revenue	(Part VIII, column (A), line	s 5, 6d, 8c, 9c, 10c, and 11e)			,038.	82,434
12 1	fotal revenue -	add lines 8 through 11 (n	must equal Part VIII, column (A), line 12)		4,246	,495.	5,150,687
13 0	Grants and sim	lar amounts paid (Part IX	(, column (A), lines 1-3)		_	0.	0
14 E	Senetits paid to	or for members (Part IX,	, column (A), line 4)			0.	0
10 C	Infectional for	compensation, employee	benefits (Part IX, column (A), lines 5-10)		3,882		4,913,154
ьт	otal fundraisin	g expenses (Part IX, colu	xumn (A), line 11e) mn (D), line 25) ► 1.041.35	1		0.	0
17 0	Other expenses	Part IX, column (A), line	Is 11a-11d, 111-24e)		2,300	450	2,056,691
18 T	otal expenses	Add lines 13-17 (must e	qual Part IX, column (A), line 25)		6,182		6,969,845
19 F	levenue less e	openses. Subtract line 18	from line 12		-1,936		-1,819,158
20 T			W THE WALL PROPERTY AND A DECK	Beg	inning of Cur	rent Year	End of Year
20 T	otal assets (Pa				21,761		19,931,723
		Part X, line 26)			2,584		3,371,794
artil	Signature	Block	ne 21 from line 20		19,177	,493.	16,559,929
	and the lot of the lot		this return, including accompanying schedules a	ed statemen	to and to the	hard of mult	and the second states and
correct,	and complete. [Declaration of preparer (othe	r than officer) is based on all information of which	h presarer h	es any keew	oest or my ki adma	townedge and cettor, it is
		and the second		in property in	as any saum	4-27-4	2021
n	Signature	Contraction of the second second	the loss of the second s	1.1	Date		
		C. TRIPP, C	BO		1		the second second
-				10			1
	Print/Type prepa	OLDFUSS	Preparer's signature	Da	tie	Check	PTIN
		WHITTLESEY	PC	-	Le.	sell-employed	P00579546
		280 TRUMBUL		-	Firm	's EIN .	*-***3326
		HARTFORD, C			Dha	860	.522.3111
_			hown above? (see instructions)	and the second se	1 1 1 1 1 1 1		

ISSION STATEMENT CONTINUATION

	t III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III X
1	Briefly describe the organization's mission:
	PROMOTING INCREASED INDEPENDENCE TO MEN AND WOMEN WHO ARE BLIND BY
	PROVIDING THEM WITH HIGHEST QUALITY GUIDE DOGS.
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?
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
4 -	revenue, if any, for each program service reported. (Code:) (Expenses \$ 4,382,440. including grants of \$) (Revenue \$ 20,081.
4a	(Code:) (Expenses \$4,382,440. including grants of \$) (Revenue \$0 (Revenue \$_Revenue \$_Rev
	INCREASED MOBILITY AND GREATER INDEPENDENCE TO PEOPLE WHO ARE BLIND OR
	VISUALLY IMPAIRED, BY BREEDING AND TRAINING, HIGHLY INTELLIGENT GERMAN
	SHEPHERD DOGS WHO ARE THEN MATCHED WITH THESE CLIENTS. THE
	ORGANIZATION DOES THIS, WITHOUT CHARGE, BY MAINTAINING A SIGNIFICANT
	SCIENTIFIC BREEDING PROGRAM, ENHANCING THE INTELLIGENCE AND STAMINA OF
	THE DOGS TO ENABLE THEM TO SPEND UP TO 10 YEARS PROVIDING GUIDANCE TO
	CLIENTS. THE ORGANIZATION IS UNIQUE IN THAT IT PROVIDES "IN-COMMUNITY"
	TRAINING, WHICH MEANS THAT CLIENTS DO NOT NEED TO TRAVEL OR SPEND TIME
	AWAY FROM THEIR HOMES AND PLACES OF WORK IN ORDER TO BE TRAINED. OUR
	HIGHLY SKILLED TRAINING STAFF, EACH OF WHOM HAS EXCELLED IN A
	THREE-YEAR TRAINING APPRENTICESHIP TRAVEL TO THE CLIENT'S COMMUNITY TO (Code:) (Expenses \$ including grants of \$) (Revenue \$) (Revenue \$)) (Revenue \$) (Revenue \$)
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4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$
	(Code:) (Expenses \$ including grants of \$) (Revenue \$
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4d	Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)

Form	990	(2019)	

Part IV Checklist of Required Schedules

FIDELCO GUIDE DOG FOUNDATION, INC

1 bit the organization described in section 501(c)(c) or 4947(a)(1) (other than a private foundation? 1 X 2 bit the organization require factor in frieted policy activities or have a section 501(c)(c) organization compare in concerns and the organization engage in lobbying activities, or have a section 501(c)(c)(c) organization compare in concerns and the organization activities on that receives membrarily dues, assessments, or similar annual set difficient Persent Proceduse BS (PH / ''we', 'complete Schedule C, Part I 4 X 5 bit the organization matching in the organization that receives membrarily dues, assessments, or similar annuals and during the max year? If ''we', 'complete Schedule D, Part I 5 X 6 Did the organization matching activities, or have a section 501(c)(c) organization that receives membrarily dues, assessments, or similar analysis, the environments in such flucker organization there the right to granization matching activities, organization there the right to granization matching activities of raceomatics for which donors have the right to granization matching or investment of an activities of raceomatics for which donors have the right to granization matching or investment of an activities of raceomatics or simulation services? 7 X 7 Did the organization matching or expenses constraints and the organization matching or expenses constraints? 8 X 9 Did the organization matching or expenses in the simular assets? 7 X 8 X 9				Yes	No
2 Is the organization engage in direct or indirect policial campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I. 3 X 4 Section 801(c)(x) organizations. Do the organization engage in loobying activities, or have a section 801(h) election in effect of indirect or indirect of indirect policic activities on behalf of or inopposition to candidates for an indirect or indirect organization engage in loobying activities, or have a section 801(h) election in effect of the organization accounts for which do are socure? They," complete Schedule C, Part II. 4 X 6 Did the organization engage in loobying activities, or have a section 801(h) election in effect the formation accounts in the indice accounts in which do are socure? They," complete Schedule D, Part II. 6 X 7 X B ord the organization engage in loobying activities, or have a sector 801(h) election in effect on endirect or indirect or indinect or indinect or indirect or indirect or indirect or indirect o	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3 Did the organization engage in direct or indirect political campaign activities on behalt of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I 3 X 3 Sections 50(16) organizations. Did the organization engage in lobbying activities, or have a section 50(16) electron in effect dim in the transmission of the section of 0(16) electron in effect dim in the transmission activities of 0(16). Soft(26) constraints on the transmission or investment of amounts in such funds or any similar funds or avacounts? (If 'Yes,' complete Schedule D, Part II 4 X 5 Did the organization maxima and or any similar funds or avacounts? (If 'Yes,' complete Schedule D, Part II 5 X 6 Did the organization maxima value distribution or investment of amounts in such funds or accounts? (If 'Yes,' complete Schedule D, Part II 6 X 7 X 8 Did the organization maxima collections of works of art, historical trassures, or other similar assets? (I' 'Yes,' complete Schedule D, Part II 7 X 9 Did the organization maxima or any similar trassets? (I' 'Yes,' complete Schedule D, Part II 7 X 10 Did the organization maxima and the schedule organization, hold assets in donor-restricted endowments or in quasi endowments? (I' 'Yes,' complete Schedule D, Part V 9 X 10 Did the organization report an amount for investments. other schedul part X, line 12? H' Y		If "Yes," complete Schedule A	1		
public office? If "Yes," complete Schedule Q, Part I 3 X 4 Section 50((c)(d) organization. Did the organization engage in lobbying activities, or have a saction 501(h) election in effect 4 X 5 Is the organization a section 501(c)(d), 507 (c)(c)(o) or 501(c)(d) organization that receives membership dues, assessments, or similar anounce Procedue DB 197 // Yes, "complete Schedule C, Part II 4 X 6 Did the organization matrian any done advised funds or any similar funds or accounts for which dones have the right to provide advised or investment of anounce in a schedue D, Part I 5 X 7 Did the organization receive or hold a conservation easement, including easements to preserve open space. 7 X 8 Did the organization report an anount in Part X, line 21, for escrow or custodial account liability, serve as a custodial for amounts not lead in Part X, ine 21, for escrow or custodial account liability, serve as a custodial for amounts not lead in Part X, line 21, for escrew or custodial account liability, serve as a custodial for an anount in Part X, line 21, for escrew or preserve open space. 10 X 10 Did the organization, meetry for through a related organization, needly for through a related organization related in Part X, line 12, that is 596 or more of its total asasts reported in Part X, line 10, the organization re	2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
4 Section 501(k(3) arganizations. Dot the organization engage in lobbying activities, or have a section 501(k) election in effect during the tax year? <i>II</i> "Yes," <i>complete Schedule C, Part II</i> . 4 X 5 Is the organization a section 501(k)(4), 501(k)(5), or 501(k)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 80-197 // Yes," <i>complete Schedule C, Part II</i> . 5 X 6 Did the organization certain any doorn advected fluxds or any similar tands or accounts? <i>II</i> "Yes," <i>complete Schedule D, Part II</i> . 6 X 7 X 8 Did the organization match match and a macro. If any transform and any doorn advected in the second or custodial account lability, serve as a custodian for anounts not listed in Part X or provide credit counseling, debt management, credit repair, or debt negotiation services? 7 X 10 Did the organization any of the following questions is "Yes," then complete Schedule D, Part IV 10 X 10 Did the organization anount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>H</i> 'yes," complete Schedule D, Part X 10 X 11 It to organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>H</i> 'yes," complete Schedule D, Part X 112 X 11 <td< th=""><td>3</td><td></td><td></td><td></td><td></td></td<>	3				
during the tax year? **/es,* complete Schedule C, Part II 4 X 5 is the organization a section S(H)(5) 501((5)) for going organization that receives membraship dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 // *Yes,* complete Schedule C, Part II 5 X 6 Did the organization matrian any donor advised funds or any similar funds or accounts for which donors have the right to provide advised on the distribution or investment and amounts in such funds or accounts? // *Yes,* complete Schedule D, Part II 6 X 7 ZX Did the organization matrian collections of works of art, historical treasures, or other similar assets? // *Yes,* complete Schedule D, Part II 7 X 8 X Ord the organization amount in Part X, line 21, for eacrow or custodial account fiability, serve as a custodian for amounts not listed in Part X, corporate accounted treasures, or other similar assets? // *Yes,* complete Schedule D, Part II 10 X 9 Did the organization indentity of through a related organization, hold assets in donor-restricted endownents? 7 X 10 Did the organization report an amount for line, buildings, and equipment in Part X, line 10? if Yes,* complete Schedule D, Part II 10 X 11 If the organization report an amount for time, semether securities in Part X, line 10? if Yes,* complete Schedule D, Part X 114 X <t< th=""><td></td><td></td><td>3</td><td></td><td>X</td></t<>			3		X
5 Is the organization section 501(c)(4), 001(c)(5), or 501(c)(6) organization that neceves membership dues, assessments, or similar amounts as defined in Revenue Procedure 99-197 if Yes," complete Schedule C, Part II 5 X D Dt the organization market and yolon advised funds or any similar finade s accounts for which dorons have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If Yes," complete Schedule D, Part II 6 X D Dt the organization market and yolon advised funds or any similar finade s accounts for by the dorons have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If Yes," complete Schedule D, Part III 7 X D Dt the organization market and amount in Part X, line 21, for secret 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 negolitation services? If Yes," complete Schedule D, Part V 10 X D Dd the organization, and the organization, hold assets in donor-restricted endowments or in quasi endowments? If Yes," complete Schedule D, Part V 10 X D Dd the organization report an amount for land, buildings, and equipment in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 197 / Yes, "complete Schedule D, Part VI 11a X D Dd the organization report an amount for investments -organ related in Part X, line 197 / Yes, "complete Schedule D, Part VI 11a X D Dd the	4				
similar amounts as defined in Revenue Procedure 98-199 # Yes,* complete Schedule C, Pert II 5 X Obt the organization maintain any doora advised funds or any similar funds or accounts? If 'Yes,* complete Schedule D, Part II 6 X 7 Did the organization releve or hold a conservation easement, including easements to preserve open space, the environment, historical freesawes, or historical treasures, or other similar assets? If 'Yes,* complete Schedule D, Part II 7 X 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,* complete Schedule D, Part II 8 X 9 Did the organization, directly or through a neleted organization, hold assets in donor-restricted endowments? 9 X 10 Did the organization answer to any of the following questions is 'Yes,* then complete Schedule D, Part V 10 X 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,* complete Schedule D, Part V 10 X 10 Did the organization report an amount for investments - other securities in Part X, line 10? If 'Yes,* complete Schedule D, Part V 11a X 11 If the organization report an amount for investments - program related in Part X, line 10? If 'Yes,* complete Schedule D, Part V 11a X 12			4		<u>X</u>
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7 Did the organization receive or hold a conservation easement, including easements to preserve open space. 7 X 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? // *Yes, *complete Schedule D, Part II 8 X 9 Did the organization report an amount in Part X, line 21, for escrew 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? 9 X 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? // *yes, * complete Schedule D, Part IV 10 X 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? // *yes, * complete Schedule D, Part V 11a X 10 Did 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? // *yes, * complete Schedule D, Part VI 11a X 11 Did the organization report an amount for investments - inorgram related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? // *yes, * complete Schedule D, Part X 11e X 11 Did the organization report an amount for other liabilities in Part X, line 12, Irita is 5% or more of its total assets reported in Part X, line 16? // *yes, * complete Schedule D, Part X 11e X <td>6</td> <td></td> <td></td> <td></td> <td>37</td>	6				37
the environment, historic all areas, or historic structures? If "Yes," complete Schedule D, Part II 7 X 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III 8 X 9 Did the organization report an amount in Part X, line 21, for escrew 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? 9 X 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments 10 X 10 Did the organization report an amount for lind, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI 10 X 11a X Did the organization report an amount for investments - other ascurities 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 11a X 11b X Did the organization report an amount for other liabilities in Part X, line 12? If 'Yes,' complete Schedule D, Part VI 11a X 11c X Did the organization report an amount for other liabilities in Part X, line 2? If 'Yes,' complete Schedule D, Part X 11a X 11c X Did the organization aschool descride dinancial statements for the tax year? </th <td>_</td> <td></td> <td>6</td> <td></td> <td><u> </u></td>	_		6		<u> </u>
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b Was the organization included in consolidated, independent audited financial statements for the tax year? 12b X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? /// f "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a X b Did the organization nave aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States? 14a X b Did the organization report activities outside the United States, or aggregate foreign investments valued at \$100,000 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 foreign 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 II and IV 15 X 17 Did the 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 G, Part II 17 X 18 Did the organization report a total of more than \$15,000 of gross income and contributions on Part VIII, line 9a? If "Yes," 18 X	12a				
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19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 X 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20a If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 20b 21 X X X X	18			v	
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domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II			200		
	21		24		x
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 Form 990 (2019)
 FIDELCO GUIDE DOG FOUNDATION, 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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	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
	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		X
29	Did 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	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	х	
Par				
	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 5			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
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019)				FOUNDATION,	
Statements F	Regarding Otl	ner IRS F	ilings a	and Tax Complian	ce (continued)

					Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	64			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	ns?		2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	Ο.		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	author	ity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	accour	nt)?	4a		X
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccoun	its (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			<u>5a</u>		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact			<u>5b</u>		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			<u>5c</u>		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th					v
Ŀ	any contributions that were not tax deductible as charitable contributions?			<u>6a</u>		X
a	If "Yes," did the organization include with every solicitation an express statement that such contributi			64		
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).			6b		
7 a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices	provided to the nevor?	7a		x
a h				7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			10		
Ŭ	to file Form 8282?			7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or	·		7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		999 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	tion fi	le a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	l by th	e			
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:		1			
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				
11	Section 501(c)(12) organizations. Enter:	1	1			
a		11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
10-	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041	2	12a		
		12 b		Iza		
ы 13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120	I			
	Is the organization licensed to issue qualified health plans in more than one state?			13a		
u	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 is licensed to issue qualified health plans	13b				
с	Enter the amount of reserves on hand	13c	1			
		<u> </u>		14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune					
	excess parachute payment(s) during the year?			15		X
	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	t incoi	ne?	16		X
	If "Yes," complete Form 4720, Schedule O.					

Form **990** (2019)

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Form 990 (2019)

Part V

Form 990	(2019)
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FIDELCO GUIDE DOG FOUNDATION, INC

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.

					Yes	N
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	10			
	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	1b	10			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	o with any other				
	officer, director, trustee, or key employee?		ľ	2		X
3	Did the organization delegate control over management duties customarily performed by or under the					
-	of officers, directors, trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9			4		x
5	Did the organization become aware during the year of a significant diversion of the organization's ass		F	5		X
6	Did the organization have members or stockholders?			6		x
	Did the organization have members, stockholders, or other persons who had the power to elect or ap					
74	more members of the governing body?			7a		x
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, st		·····	74		
D.				7b		x
0				70		- 23
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year		ŀ	0-	Х	
	The governing body?			8a 0h	X	
-	Each committee with authority to act on behalf of the governing body?		·····	8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read			•		x
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O			9		
	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue Code.)			V.	
10 -			ſ	10 -	Yes	No X
	Did the organization have local chapters, branches, or affiliates?		·····	10a		
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch					
	and branches to ensure their operations are consistent with the organization's exempt purposes?		Г	10b	37	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body	y before filing the f	orm?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		ļ		37	
	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	Yes," describe				
	in Schedule O how this was done			12c	Х	
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 approva	al 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	Х	
	Other officers or key employees of the organization			15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		ſ			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	ment 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 evaluat					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	nization's				
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed CT , MA , NY , PA , F	'L,NJ				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar		501(c)(3)s	only)	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.	,				
		n on Schedule O)				
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	,	blicy, and	financ	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 boo	oks and records				
	DIANE LINDELAND - 860-243-5200					
	103 VISION WAY, BLOOMFIELD, CT 06002					

Form 990 (2019)

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See 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.

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average hours per week	box	not cl , unles	ss per	more rson i	than o s both r/trus	n an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Offlicer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) KAREN C. TRIPP	60.00							120 172	0	0
CHIEF EXECUTIVE OFFICER	1 00	X		X				139,173.	0.	0.
(2) G. KENNETH BERNHARD, ESQ. CHAIRMAN	1.00	x		x				0.	0.	0.
(3) MARK T. BERTOLINI	1.00							0.	0.	0.
DIRECTOR	1.00	x						0.	0.	0.
(4) EDWARD H. BUDD	1.00									
DIRECTOR		x						0.	0.	0.
(5) JOHN H. GOTTA	1.00									
SECRETARY		Х		Х				0.	Ο.	0.
(6) LILIAN F. JOHNSON	1.00									
DIRECTOR		Х						0.	0.	0.
(7) STEPHEN H. MATHESON	1.00									
DIRECTOR EMERITUS		Х						0.	0.	0.
(8) KAREN SHAW PETROU	1.00									
DIRECTOR		Х						0.	0.	0.
(9) HONORABLE M. JODI RELL	1.00								0	0
DIRECTOR	1 0 0	Χ						0.	0.	0.
(10) PETER L. TEDONE	1.00	x		x				0.	0.	0.
TREASURER (11) RICHARD PUMMELL	50.00			<u> </u>		-		0.	0.	0.
VP, DIRECTOR OF DEVELOPMENT AND HR	50.00					x		160,380.	0.	26,419.
(12) TAMER MOURAD	50.00							100,500.		20,419.
VP, DIRECTOR OF GUIDE DOG TRAININGS		1				x		106,644.	0.	862.
(13) MEREDITH BUONO DAGROSSA	40.00									
MAJOR GIFTS OFFICER		1				x		100,728.	Ο.	734.
(14) ELIOT D. RUSSMAN	60.00									
PRESIDENT & CEO THRU 4/30/19		1					х	219,719.	0.	41,595.
(15) DOUGLAS FUCHS	50.00									
COO THRU 7/31/2019							Х	140,688.	0.	42,145.
		<u> </u>				<u> </u>				
		1								
	1	1		1				1		– – – – – – – – – –

932007 01-20-20

Form 990 (2019)

	990 (2019) FIDELCO G	JUIDE DC	G	FO	UN	DA	TI	ON	I, INC	**_**	* * 0	<u>478</u>	P	age 8
Par	VII Section A. Officers, Directors, Trust	ees, Key Emp	ploy	ees,	and	l Hig	ghes	st C	ompensated Employee	s (continued)				
	(A) (B) (C) Name and title Average hours per week Position (do not check more than one box, unless person is both an officer and a director/trustee)							(D) Reportable compensation from	(E) Reportable compensation from related			(F) stimate nount other		
	(list any hours for related organizations bours for related bours for r									fi org an	pensa rom the ganizat d relate anizatio	e ion ed		
									0.					
	Total (add lines 1b and 1c)								867,332.		0.		1,7	
2	Total number of individuals (including but no compensation from the organization	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100	000 of reportable	1			6
													Yes	No
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for su	-			•	-						3	X	
4	For any individual listed on line 1a, is the su													
	and related organizations greater than \$150											4	X	
5	Did any person listed on line 1a receive or a rendered to the organization? <i>If</i> "Yes," <i>com</i>							elate	ed organization or indivi	dual for services		5		X
Sec	tion B. Independent Contractors	olete Scheoule	<u>, J T</u>	or su	icn r	bers	on .					5	·	- 23
1	Complete this table for your five highest cor	-									ensat	tion fr	om	
the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) Name and business address NONE										С		C) Insatio	n	
2	Total number of independent contractors (in	-	ot lin	nitec	l to t			ted	above) who received m	ore than				
	\$100,000 of compensation from the organiz	ation 🕨				C)						000	

Form **990** (2019)

932008 01-20-20

Form	1 990	(2019) FIDELCO GUIDE	DOG FOUI	NDATION, IN	NC	**-***0	478 Page 9
	rt VI						
		Check if Schedule O contains a response of	or note to any lin	e in this Part VIII			
				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded
					function revenue	business revenue	from tax under sections 512 - 514
							00010110 012 011
nts	18	Federated campaigns 1a					
Gra	k	Membership dues 1b	CO 140				
Contributions, Gifts, Grants and Other Similar Amounts	c	Fundraising events 1c	69,147.				
Gifi Iar	c	Related organizations 1d					
imi	e	Government grants (contributions)	727,900.				
tior S	f	All other contributions, gifts, grants, and					
bu ⁻		similar amounts not included above If 3,	897,514.				
d O	ç	Noncash contributions included in lines 1a-1f	5,760.				
Co	ŀ	Total. Add lines 1a-1f		4,694,561.			
			Business Code				
đ	2 8	SALES OF PRODUCTS AND	900099	20,081.	20,081.		
vic	k						
Ser							
Jram Ser Revenue							
Program Service Revenue		l					
roi	e						
ш		All other program service revenue	<u> </u>	20 001			
		Total. Add lines 2a-2f	· · · · · · · · · · · · · · · · · · ·	20,081.			
	3	Investment income (including dividends, intere		040 141			040 141
		other similar amounts)		249,141.			249,141.
	4	Income from investment of tax-exempt bond p	roceeds				
	5	Royalties					
		(i) Real	(ii) Personal				
	6 a	Gross rents 6a 88,130.					
	b	Less: rental expenses 6b 17,117.					
	c	Rental income or (loss) 6c 71,013.					
	c	Net rental income or (loss)		71,013.			71,013.
		Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a 925 , 639 .					
	ŀ	Less: cost or other basis					
e	~	and sales expenses					
evenue		Gain or (loss)					
eve				104,470.			104,470.
Other R		I Net gain or (loss)		104,470.			104,470.
the	88	Gross income from fundraising events (not including $(1, 1, 2, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3,$					
0		including \$ 69,147. of					
		contributions reported on line 1c). See					
		Part IV, line 18 8a					
		Less: direct expenses 8b	10,144.	4			4 . 0.0.4
		Net income or (loss) from fundraising events	🕨	-4,384.			-4,384.
	9 a	Gross income from gaming activities. See					
		Part IV, line 19 9a					
	k	Less: direct expenses 9b					
	c	Net income or (loss) from gaming activities					
	10 a	Gross sales of inventory, less returns					
		and allowances 10a					
	Ŀ	Less: cost of goods sold					
		Net income or (loss) from sales of inventory					
			Business Code				
sn	11 a						
oer ue	11 č						<u></u>
llar /en	k						
Miscellaneous Revenue	c		900099	15 005			15 005
Mis	c	All other revenue		15,805.			15,805.
		Total. Add lines 11a-11d		15,805.		0	126 045
	12	Total revenue. See instructions	>	5,150,687.	20,081.	0.	,
93200	9 01-2)-20					Form 990 (2019)

FIDELCO GUIDE DOG FOUNDATION, 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).

	Check if Schedule O contains a respon				
	not include amounts reported on lines 6b, 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				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	0.67 0.00		100 000	100 506
	trustees, and key employees	867,332.	545,354.	192,392.	129,586.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	2 440 212	1 520 202	412 470	106 110
7	Other salaries and wages	2,449,212.	1,539,293.	413,470.	496,449.
8	Pension plan accruals and contributions (include				
~	section 401(k) and 403(b) employer contributions)	1,289,739.	882,933.	238,111.	168,695.
9	Other employee benefits	306,871.	164,648.	63,585.	78,638.
10	Payroll taxes	500,071.	104,040.	03,303.	70,030.
11	Fees for services (nonemployees):				
	Management	44,946.		44,946.	
		35,800.		35,800.	
	Accounting	55,000.			
	Lobbying Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
5	column (A) amount, list line 11g expenses on Sch 0.)	49,466.	12,571.	36,895.	
12	Advertising and promotion	77,442.	3,249.	,	74,193.
13	Office expenses	212,030.	61,838.	126,347.	23,845.
14	Information technology	7,747.	4,283.	3,464.	
15	Royalties				
16	Occupancy	226,890.	185,346.	22,239.	19,305.
17	Travel	174,835.	170,791.	1,300.	2,744.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	8,016.	6,349.	825.	842.
20	Interest				
21	Payments to affiliates	000 001			
22	Depreciation, depletion, and amortization	378,071.	316,311.	33,687.	28,073.
23	Insurance	136,186.		136,186.	
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 0.)	200 1/1	200 1 / 1		
a	KENNEL COSTS	288,141.	288,141.		
b					
c c					
d	All other expenses	417,121.	201,333.	196,807.	18,981.
е 25	Total functional expenses. Add lines 1 through 24e	6,969,845.	4,382,440.	1,546,054.	1,041,351.
<u>25</u> 26	Joint costs. Complete this line only if the organization	0,000,040	-,002,1100	_,	_,,
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
				1	000

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932010 01-20-20

2019.05092 FIDELCO GUIDE DOG FOUNDAT 10322.01

Form 990 (2019)

11350426 756208 10322.001

 Part X
 Balance Sheet

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

-*0478 Page 11

CA) Beginning of year End of year 1 Cash - non-interest-bearing 1,029,989.1 403,714. 2 Savings and temporary cash investments 2 140,401. 3 Predges and grants receivable, net 125,205.3 140,401. 4 Accounts receivables from ory current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or framily member of any of these persons 5 6 Loans and other receivables from other disqualified persons (as defined under section 49580(10)), and persons described in section 49560(308) 6 7 Notes and loans receivable, net 7 8 Treations for sale or use 8 9 Prepard expenses and deferred charges 100, 955, 549. 10a 10, 955, 549. 2 11 Investments - other socities. See Part IV, line 11 12, 392, 926.1 11 Investments - other socities. See Part IV, line 11 121, 761, 759.1 12 Investments - other socities. See Part IV, line 11 121, 761, 759.1 13 Investments - other socities. See Part IV, line 11 121, 761, 759.1 14 Intany			Check if Schedule O contains a response or note to any line	in this Part X			
2 Savings and temporary cash investments 2 9 Pledges and grants receivable, net 125,205.3 140,401. 4 Accounts receivable, net 125,205.3 140,401. 5 Lcans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Lcans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 7 Notes and loans receivable, net 8 9 Prepaid expenses and deferred charges 156,380.9 153,101. 10 Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10 5,791,334. 10c 5,440,521. 11 Investments - publicly traded securities. 122,392,926. 11 11,893,211. 12 Investments - publicly traded securities. 2,265,925. 16 19,931,723. 16 Total assets. See Part IV, line 11 13 11 11,893,211. 17 Accounts payable and accrued expenses 1,737,146. 17 2,306,2					Beginning of year		End of year
2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 125,205. 3 140,401. 4 Accounts receivable, net 4 4 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Loans and other receivables from other disgualified persons (as defined under section 4958()(1)), and persons described in section 4958(c)(3)(B) 6 7 Notes and loans receivable, net 7 8 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 156,380. 9 153,101. 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10b 5,791,334. 10c 5,440,521. 11 Investments - publicly traded securities. 10b 5,515,028. 5,791,334. 10c 5,440,521. 12 Investments - publicly traded securities. 12,302,926. 11 11,893,211. 11 Investments - publicly traded securities. 12,65,925. 15		1	Cash - non-interest-bearing		1,029,989.	1	403,714.
9900 4 Accounts receivable, net 4 5 Lans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Lans and other receivables from other disqualified persons (as defined under section 4958(f(1)), and persons described in section 4958(c)(3(B) 6 7 Notes and loans receivable, net 7 8 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 156, 380. 9 10a 10, 955, 5549. 8 11 Investments: other securities. See Part IV, line 11 12 12 Investments: other securities. See Part IV, line 11 12 13 Investments: other securities. See Part IV, line 11 13 14 Intangible assets 14, 90, 775. 16 Total assets. Add lines 11 through 15 (must equal line 33) 21, 761, 759. 16 19, 931, 723. 17 Accounts payable and accrued expenses 20 20 21 21 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22		2					
S Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(h(1)), and persons described in section 4958(c)(3)(B) 6 7 Notes and loans receivable, net 7 8 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 156,380. 9 153,101. 10a 10,955,549. 8 156,380. 9 153,101. 11 Investments - policy traded securities 12,392,926. 11 11,893,211. 11 Investments - program-related. See Part IV, line 11 12 12 12,392,926. 11 11,900,775. 13 Investments - program-related. See Part IV, line 11 13 14 14 13 14 Intraspets. See Part IV, line 11 13 12,761,759. 16 19,931,723. 17 Accounts payable and accrued expenses 1,737,146. 17 2,306,298. 18 Grants payable 20 21 20 22 22		3	Pledges and grants receivable, net	125,205.	3	140,401.	
gggg trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 7 Notes and loans receivable, net 7 8 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 156,380. 10a Land, buildings, and equipment: cost or other basis. Complete Part V of Schedule D 10a 10,955,549. 11 Investments - publicly traded securities 12,392,926. 11 11,893,211. 12 Investments - publicly traded securities 12,265,925. 15 1,900,775. 16 Total assets. See Part IV, line 11 13 14 11,737,146. 17 2,306,298. 17 Accounts payable and accrued expenses 11,737,146. 17 2,306,298. 1,761,759. 16 19,931,723. 19 Deferred revenue 19 20 20 21 22 2,306,298. 1,761,759. 19,931,723. 19 Deferred revenue 19 20 20 21		4			4		
gg controlled entity or family member of any of these persons 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(0)(1)), and persons described in section 4958(c)(3)(B) 6 7 Notes and loans receivable, net 7 8 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 156,380. 9 153,101. 10a Lad, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10 5,791,334. 10c 5,440,521. 11 Investments - publicly traded securities 12,392,926. 11 11,893,211. 12 Investments - program-related. See Part IV, line 11 12 12,265,925. 15 1,900,775. 16 Total assets. Add lines 1 through 15 (must equal line 33) 21,761,759. 16 19,931,723. 17 Accounts payable and accrued expenses 19 21 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 23 24 20 21 Escrow or custodial account liabilifty. Complete Part IV of Schedul		5					
6 Loans and other receivables from other disqualified persons (as defined under section 4958)((1)), and persons described in section 4958)(c)(3)(B) 6 7 Notes and loans receivable, net 7 8 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 156,380. 9 153,101. 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 10,955,549. b Less: accumulated depreciation 10b 5,515,028. 5,791,334. 10c 5,440,521. 11 Investments - publicly traded securities 12,392,926. 11 11,893,211. 12 Investments - program-related. See Part IV, line 11 13 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 1,737,146. 17 2,306,298. 15 Total assets. Add lines 1 through 15 (must equal line 33) 21,761,759. 16 19,931,723. 17 Accounts payable and accrued expenses 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to any current of former officer, director, trustee, key employee, creator of founder, substantial contributor, or 35%				butor, or 35%			
gg under section 4958(f)(1), and persons described in section 4958(c)(3)(B) 6 7 Notes and loans receivable, net 7 8 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 156,380. 9 153,101. 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 10,955,549. 2 11 Investments - publicity traded securities 12,392,926. 11 11,893,211. 12 Investments - publicity traded securities 12,225,925. 15 1,900,775. 13 Investments - program-related. See Part IV, line 11 13 14 14 14 Inters payable and accrued expenses 1,737,146. 17 2,306,298. 19 Deferred revenue 19 20 21 22 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 20 21 22 22 22 22 22 22 22 22 22 22 22 22 23 <th></th> <th></th> <th></th> <th></th> <th></th> <th>5</th> <th></th>						5	
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Organizations that follow FASB ASC 958, check here 🕨 🔀		26			2 584 266		3 371 794
and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions 28 Net assets with donor restrictions 0rganizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 29 30		20		X	2,304,200.	20	5,571,754.
27 Net assets without donor restrictions 5,886,398.27 3,529,974. 28 Net assets with donor restrictions 13,291,095.28 13,029,955. Organizations that do not follow FASB ASC 958, check here □ 13,291,095.28 13,029,955. 29 Capital stock or trust principal, or current funds 29 29 30 Paid-in or capital surplus or land, building, or equipment fund 30	es						
28 Net assets with donor restrictions 13,291,095.28 13,029,955. Organizations that do not follow FASB ASC 958, check here ▶ 13,291,095.28 13,029,955. and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 30 Paid-in or capital surplus or land building or equipment fund 30	anc	27	· · · · ·	F	5,886,398.	27	3,529,974.
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30 Paid-in or capital surplus or land building or equipment fund	s or	29		Г		29	
	set	30	Paid-in or capital surplus, or land, building, or equipment fun			30	
31 Retained earnings, endowment, accumulated income, or other funds 31	As	31	Retained earnings, endowment, accumulated income, or oth	ner funds			
32 Total net assets or fund balances 19,177,493.32 16,559,929.	Net	32	Total net assets or fund balances				
33 Total liabilities and net assets/fund balances	-	33			21,761,759.	33	<u>19,931,723.</u>

Form **990** (2019)

FIDELCO GUIDE DOG FOUNDATION, INC

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Form 990 (2019)

	990 (2019) FIDELCO GUIDE DOG FOUNDATION, INC	**_*	<u>**0478</u>	Pa	_{ge} 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	5,15		
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,96	-	
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,81		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	19,17		
5	Net unrealized gains (losses) on investments	5	-49	9,4	<u>99.</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8	-29	8,9	
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	16,55	9,9	29.
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	Accounting method used to prepare the Form 990: Cash X Accrual Other		-		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		<u>2a</u>		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis			37	
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the			Х	
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
•	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	0			x
	Act and OMB Circular A-133?		<u>3a</u>		
α	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit	0		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	990	(2010)

Form **990** (2019)

SCHEDULE A	IEDULE A	4
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Department of the Treasury Internal Revenue Service

(Form	990	or	990-EZ
	550		

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2019
Open to Public Inspection

Name of the	organization
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Nan		ne organization					6				
De		FIDE.	LCO GUIDE I	DOG FOUNDATIO	DN, IN	VC		*	*-**0478		
	rtl	Reason for Public C					ee instructions.				
The	organ	ization is not a private found	ation because it is: (I	For lines 1 through 12, c	heck only	one box.)					
1		A church, convention of chu	urches, or associatio	n of churches described	in sectio	n 170(b)(1	1)(A)(i).				
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)									
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).									
4		A medical research organization	ation operated in cor	njunction with a hospital	described	in sectio	on 170(b)(1)(A)(i	ii). Enter	the hospital's name,		
		city, and state:									
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in									
		section 170(b)(1)(A)(iv). (Complete Part II.)									
6		A federal, state, or local gov	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).				
7	X	An organization that normal	Ily receives a substa	ntial part of its support fi	om a gove	ernmental	unit or from the	general p	oublic described in		
		section 170(b)(1)(A)(vi). (C									
8		A community trust describe		(1)(A)(vi). (Complete Par	t II.)						
9	\square	An agricultural research org				ed in coniu	unction with a la	nd-grant	college		
•		or university or a non-land-g									
		university:	, and contrage of agric				,	.e eenege			
10		An organization that normal	lly receives: (1) more	than 33 1/3% of its sup	ort from a	contributio	ns membershir	o fees an	d aross receipts from		
		activities related to its exem					•		•		
		income and unrelated busir									
		See section 509(a)(2). (Cor				oco doqui	rea by the orga				
11	\square	An organization organized a		vely to test for public sa	fetv See	section 50) 9(a)(4)				
12	\square	An organization organized a	•					out the	nurnoses of one or		
		more publicly supported or		•	-						
		lines 12a through 12d that									
2		Type I. A supporting orga						-	aivina		
а					•	-					
		the supported organization			majonty u		lors of trustees		ipporting		
h		organization. You must c			ion with it		d arganization/		ina		
b		Type II. A supporting org	-					•	-		
		control or management or			arrie perso	ns that co	ntroi or manage	the supp	Joned		
-		organization(s). You mus			in connoct	lion with	and functionally	intograta	dwith		
с		J Type III functionally inter					-	megrate	a with,		
		its supported organization		-							
d		J Type III non-functionally									
		that is not functionally int			•		-	n attentiv	/eness		
		requirement (see instructi									
е		Check this box if the orga					Type I, Type II,	Type III			
		functionally integrated, or	51	nally integrated supporting	ng organiz	ation.			[]		
Ť		er the number of supported o	• · · · · · · · · · · · · · · · · · · ·								
<u> </u>		vide the following information i) Name of supported	i about the supporte	d organization(s). (iii) Type of organization	(iv) Is the orga		(v) Amount of m	onetary	(vi) Amount of other		
	,	organization	(,	(described on lines 1-10	in your governi	l [°]	support (see inst	,	support (see instructions)		
		5		above (see instructions))	Yes	No		,	, , ,		
Tota	1										

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 932021 09-25-19 Schedule A (Form 990 or 990-EZ) 2019 13

Schedule A (Form 990 or 990-EZ) 2019 FIDELCO GUIDE DOG FOUNDATION, INC **-**0 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

-*0478 Page 2

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

260	Section A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	4648749.	2975724.	3891388.	3760170.	4700321.	19976352.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge		0000000	2001200	2860180	4500001	
	Total. Add lines 1 through 3	4648749.	2975724.	3891388.	3760170.	4700321.	19976352.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
-	column (f)						10076252
	Public support. Subtract line 5 from line 4.						19976352.
		(-) 0015	(1-) 0010	(-) 0017	(4) 0010	(-) 0010	(f) Tatal
	ndar year (or fiscal year beginning in) Amounts from line 4	(a) 2015 4648749.	(b) 2016 2975724.	(c) 2017 3891388.	(d) 2018 3760170.	(e) 2019	(f) Total 19976352.
	Gross income from interest,	1010/10	2919124.	5051500.	5700170.	1700521.	199703521
0	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	378,388.	336 412.	326,232.	284,488.	249,141.	1574661.
٩	Net income from unrelated business	570,500.	550,412.	520,252.	201,100.	219,111.	13/10011
3	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part VI.)	34,768.	44.335.	212,964.	54,669.	5.760.	352,496.
11	Total support. Add lines 7 through 10			/			21903509.
12		etc. (see instructio	ons)	1		12	
	First five years. If the Form 990 is for		,				
	organization, check this box and stor	0	, ,	, ,		()()	
Sec	ction C. Computation of Publi	c Support Per					
14	Public support percentage for 2019 (li	ine 6, column (f) di	vided by line 11, c	olumn (f))		14	91.20 %
15	Public support percentage from 2018	Schedule A, Part	II, line 14			15	90.85 %
	33 1/3% support test - 2019. If the c					ore, check this bo	x and
	stop here. The organization qualifies as a publicly supported organization						
b	b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box						
	and stop here. The organization qualifies as a publicly supported organization						
1 7a	17a 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,						
	and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization						
	meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization						
b	b 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or						
	more, and if the organization meets th	ne "facts-and-circur	mstances" test, ch	eck this box and	stop here. Explair	n in Part VI how the	e
	organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization						
18	Private foundation. If the organizatio	n did not check a l	box on line 13, 16a	a, 16b, 17a, or 17b			
	Schedule A (Form 990 or 990-EZ) 2019						

Schedule A (Form 990 or 990-EZ) 2019 FIDELCO GUIDE DOG FOUNDATION, INC Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
-	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
с	Add lines 10a and 10b						
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is fo	r the organization's	s first, second, thi	rd, fourth, or fifth t	tax year as a sectior	n 501(c)(3) organiza	ation,
	check this box and stop here						
Sec	ction C. Computation of Public	c Support Per	centage				
15	Public support percentage for 2019 (I	ine 8, column (f), d	ivided by line 13,	column (f))		15	%
	Public support percentage from 2018					16	%
Sec	ction D. Computation of Invest	stment Income	e Percentage				
17	Investment income percentage for 20)19 (line 10c, colur	nn (f), divided by l	ine 13, column (f))		17	%
	Investment income percentage from					18	%
19a	33 1/3% support tests - 2019. If the	organization did n	ot check the box	on line 14, and lin	ie 15 is more than 3	3 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box a	nd stop here. The	organization qual	ifies as a publicly	supported organiza	tion	
b	33 1/3% support tests - 2018. If the	organization did n	ot check a box or	n line 14 or line 19	a, and line 16 is mo	re than 33 1/3%, a	ind
	line 18 is not more than 33 1/3%, che	ck this box and st	op here. The orga	anization qualifies	as a publicly suppo	rted organization	
20	Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check t			▶□]
93202	3 09-25-19				Sch	edule A (Form 990) or 990-EZ) 2019
			15)			

Schedule A (Form 990 or 990-EZ) 2019 FIDELCO GUIDE DOG FOUNDATION, INC

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and *if you checked 12a or 12b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.**
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If* "Yes." *complete Part I of Schedule L (Form 990 or 990-EZ).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "Yes," *provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer 10b below.*
- **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a

1

Yes No

Schedule A (Form 990 or 990-EZ) 2019

10b

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Schedule A (Form 990 or 990-EZ) 2019 FIDELCO GUIDE DOG FOUNDATION, INC

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
0	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
•	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	0		
2	the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described in (2) , did the exception's supported organizations have a	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
		3		
Sec	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	5		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
' a	The organization satisfied the Activities Test. <i>Complete</i> line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instr	ructions		
2	Activities Test. Answer (a) and (b) below.	40110110	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

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Schedule A (Form 990 or 990-EZ) 2019

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	dule A (Form 990 or 990-EZ) 2019 FIDELCO GUIDE DOG FOUND.			**-***0478 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orgai	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on	Nov. 20, 1970 (explain in	Part VI). See instructions. All
	other Type III non-functionally integrated supporting organizations must co	mplete Se	ections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ly integrat	ed Type III supporting or	ganization (see

instructions).

Schedule A (Form 990 or 990-EZ) 2019

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Schedule A (Form 990 or 990-EZ) 2019 FIDELCO GUIDE DOG FOUNDATION, INC

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)					
Secti	on D - Distributions	Current Year			
1	Amounts paid to supported organizations to accomplish exer	mpt purposes			
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity				
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations	3		
4	Amounts paid to acquire exempt-use assets				
5	Qualified set-aside amounts (prior IRS approval required)				
6	Other distributions (describe in Part VI). See instructions.				
7	Total annual distributions. Add lines 1 through 6.				
8	Distributions to attentive supported organizations to which the	e organization is responsive			
	(provide details in Part VI). See instructions.				
9	Distributable amount for 2019 from Section C, line 6				
10	Line 8 amount divided by line 9 amount				
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019	
1	Distributable amount for 2019 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2019 (reason-				
	able cause required- explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2019				
a	From 2014				
b	From 2015				
c	From 2016				
d	From 2017				
e	From 2018				
f	Total of lines 3a through e				
g	Applied to underdistributions of prior years				
h	Applied to 2019 distributable amount				
i	Carryover from 2014 not applied (see instructions)				
j_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.				
4	Distributions for 2019 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
	Applied to 2019 distributable amount				
	Remainder. Subtract lines 4a and 4b from 4.				
5	Remaining underdistributions for years prior to 2019, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2019. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2020. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2015				
	Excess from 2016				
	Excess from 2017				
	Excess from 2018				
e	Excess from 2019				

Schedule A (Form 990 or 990-EZ) 2019

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Schedule A	(Form 990 or 990-EZ) 2019	FIDELCO GUI	DE DOG FOUN	DATION,	INC	**-***0478	Page 8
Part VI	Supplemental Inform Part IV, Section A, lines 1 line 1; Part IV, Section D, Section D, lines 5, 6, and	mation. Provide the e , 2, 3b, 3c, 4b, 4c, 5a, 6 lines 2 and 3; Part IV, Se	xplanations required 9a, 9b, 9c, 11a, 11b ection E, lines 1c, 2a,	by Part II, line 1 , and 11c; Part I 2b, 3a, and 3b;	0; Part II, line 17a o V, Section B, lines Part V, line 1; Part	or 17b; Part III, line 12; 1 and 2; Part IV, Section V, Section B, line 1e; Pa	ıC,
	(See instructions.)						
932028 09-25-1	٩				Sched	ule A (Form 990 or 990-	F7) 2010
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Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Employer identification number

	FIDELCO GUIDE DOG FOUNDATION, INC	**-***0478
Organization type (chec	k one):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of crueity to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set is contributions totaling \$5,000 or more during the year for an *exclusively* set is contributions totaling \$5,000 or more during the year for an *exclusively* set is contributions totaling \$5,000 or more during the year for an *exclusively* set is contributions totaling \$5,000 or more during the year for an *exclusively* set is contributed.

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Name of organization

-*0478

FIDELCO GUIDE DOG FOUNDATION, INC

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 1 X Person Payroll 208,320. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 2 Χ Person Payroll 135,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 3 X Person Payroll 918,570. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 Type of contribution **Total contributions** No. 4 X Person Payroll 168,746. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 5 X Person Payroll 123,137. Noncash \$ (Complete Part II for noncash contributions.) (b) (c) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

923452 11-06-19

11350426 756208 10322.001

Name of organization

Employer identification number

-*0478

FIDELCO GUIDE DOG FOUNDATION, INC

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

	Noncash Property (see instructions). Use duplicate copies of Par		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-			
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a)		(c)	
No. rom Part I	(b) Description of noncash property given	FMV (or estimate) (See instructions.)	(d) Date received
		—	
		\$	
(a) No.	(b)	(c)	(d)
rom Part I	Description of noncash property given	FMV (or estimate) (See instructions.)	Date received
		¢	
		\$	
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
art I			
		\$	
(a)		(c)	
No. rom	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
art I	· · · · · · · · · · · · · · · ·	(See instructions.)	

923453 11-06-19

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Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Schedule E	3 (Form 990, 990-EZ, or 990-PF) (2019)				Page 4	
Name of or	ganization				Employer identification number	
FTDFT.	CO GUIDE DOG FOUNDATION	TNC			**-***0478	
Part III	Exclusively religious, charitable, etc., contribut	ions to organizations desc				
	from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious,) through (e) and the follow charitable, etc., contributions of	ing line entry. For a \$1,000 or less for the second	organizations the year. (Enter this info. on	ıce.) ▶\$	
	Use duplicate copies of Part III if additional	space is needed.				
(a) No. from	(b) Purpose of gift	(c) Use of	gift	(d) Des	cription of how gift is held	
Part I						
ŀ		(o) Trans	fer of gift			
			ier of gift			
	Transferee's name, address, a	nd ZIP + 4	R	elationship of tra	ansferor to transferee	
(a) No. from	(b) Purpose of gift	(c) Use of	aift	(d) Des	cription of how gift is held	
Part I						
ŀ						
	(e) Transfer of gift					
	Transferee's name, address, and ZIP + 4			elationship of tra	ansferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Des	cription of how gift is held	
		(e) Trans	fer of gift			
	Transferee's name, address, a	R	elationship of tra	ansferor to transferee		
Γ						
(a) No. from	(b) Purpose of gift	(c) Use of	aift	(d) Door	cription of how gift is held	
Part I	(b) Fulpose of girt		girt	(u) Des		
Ļ						
		(e) Trans	fer of gift			
	Transferee's name, address, a	nd ZIP + 4	R	elationship of tra	ansferor to transferee	
Γ	· _ · · · · · ·					
			•			

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

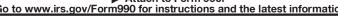
11350426 756208 10322.001

SCHEDULE	D
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Department of the Treasury

)

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.





Internal Revenue Service Name of the organization

FIDELCO GUIDE DOG FOUNDATION, INC Employer identification number **-***0478

Par			or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	-	
	are the organization's property, subject to the organization's e		
6	Did the organization inform all grantees, donors, and donor ad	dvisors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor or	r donor advisor, or for any other purpose	conferring
Dec			
Par			Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (for example, recreat		f a historically important land area
	Protection of natural habitat	Preservation of	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
а			
b			
с	Number of conservation easements on a certified historic stru		
d	Number of conservation easements included in (c) acquired a		
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	organization during the tax
	year		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the peri		
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, I	nandling of violations, and enforcing cons	servation easements during the year
7	Amount of our encoding manifesting inconsting handl		
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conserva-	tion easements during the year
8	Does each conservation easement reported on line 2(d) above	a satisfy the requirements of section 170	
0	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation		
Ũ	balance sheet, and include, if applicable, the text of the footn		
	organization's accounting for conservation easements.		
Par		Art, Historical Treasures, or Ot	her Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958	8, not to report in its revenue statement a	nd balance sheet works
	of art, historical treasures, or other similar assets held for pub	lic exhibition, education, or research in fu	irtherance of public
	service, provide in Part XIII the text of the footnote to its finan	cial statements that describes these item	IS.
b	If the organization elected, as permitted under FASB ASC 958	8, to report in its revenue statement and b	palance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furth	nerance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		• \$
2	If the organization received or held works of art, historical treat	asures, or other similar assets for financia	
	the following amounts required to be reported under FASB AS	SC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		• \$
	Assets included in Form 990, Part X		- · ·
LHA	For Paperwork Reduction Act Notice, see the Instructions	for Form 990.	Schedule D (Form 990) 2019
932051	10-02-19		

Sche		GUIDE DOG					**_**			_{age} 2
Par	t III Organizations Maintaining C	ollections of Art	, Historical Tr	easures, o	r Other	r Similar	^r Assets	contin	ued)	
3	Using the organization's acquisition, accession	on, and other records	, check any of the	following that	make si	ignificant u	use of its			
	collection items (check all that apply):									
а	Public exhibition	d	Loan or ex	change progra	am					
b	Scholarly research	е	Other							
с	Preservation for future generations									
4	Provide a description of the organization's co	ellections and explain	how they further	the organizatio	n's exen	npt purpos	se in Part	XIII.		
5	During the year, did the organization solicit o									
	to be sold to raise funds rather than to be ma	aintained as part of th	e organization's c	ollection?				Yes		No
Par	t IV Escrow and Custodial Arrang	gements. Comple	te if the organizati	on answered '	'Yes" on	Form 990	, Part IV, I	line 9, or		
	reported an amount on Form 990, Pa	t X, line 21.								
1a	Is the organization an agent, trustee, custodi	an or other intermedi	ary for contributio	ns or other ass	sets not i	included				
	on Form 990, Part X?							Yes		No
b	If "Yes," explain the arrangement in Part XIII									
			Ū					Amount		
с	Beginning balance					1c				
	Additions during the year									
	Distributions during the year									
f	Ending balance					1f				
2a	Did the organization include an amount on Fe					ity?		Yes		No
	If "Yes," explain the arrangement in Part XIII.							_		Ī
Par						10.				
		(a) Current year	(b) Prior year	(c) Two yea	s back	(d) Three y	ears back	(e) Four	vears	back
1a	Beginning of year balance	15,506,269.	16,768,387				03,911.			829.
b	Contributions	394,408.	384,812	. 1,40	7,098.	5	17,760.	1,	740,	282.
	Net investment earnings, gains, and losses	39,271.	597,875	. 1,031	1,154.	1,8	02,172.		-28,	141.
d	Grants or scholarships									
	Other expenditures for facilities									
-	and programs	1,614,105.	2,079,632	. 2,233	3,258.	3,4	00,082.	3,	767,	963.
f	Administrative expenses		. ,	,	,		, 92,980.	,	,	096.
g	End of year balance	14,325,843.	15,671,442	. 16,335	5,775.	16,1	30,781.	17,		911.
2	Provide the estimated percentage of the curr				,	,	,	,	,	
_ a	Board designated or quasi-endowment		%							
b	Permanent endowment	%	_/*							
		/°								
Ū	The percentages on lines 2a, 2b, and 2c sho	, -								
3a	Are there endowment funds not in the posse	-	tion that are held :	and administer	ed for th	e organiza	ation			
	by:	ooron or the organiza				ie erganize		Г	Yes	No
	(i) Unrelated organizations							3a(i)	X	
	(ii) Related organizations							3a(ii)		Х
b	If "Yes" on line 3a(ii), are the related organiza							3b		
4	Describe in Part XIII the intended uses of the							_ 0.0		
Par	t VI Land, Buildings, and Equipm									
	Complete if the organization answere		Part IV. line 11a.	See Form 990	. Part X.	line 10.				
	Description of property	(a) Cost or ot		st or other		ccumulate	h	(d) Book	value	
		basis (investm	• • •	s (other)		preciation		(4) 2001	value	5
1a	Land		,	50,000.				1,150),00	00.
b	Buildings			54,327.	4.1	128,82		4,235		
	Leasehold improvements			49,642.	- / -	49,64		_,	,	0.
	Equipment			91,580.	1.3	336,56		55	5.01	19.
	Other			_,					,	
	. Add lines 1a through 1e. (Column (d) must e		(column (P) line	10c)				5,440	.52	21.
	The another another to though the thought to thought to	guari uni 330, Fall /		100,1			Schedule			
								- 1. 0.11		

932052 10-02-19

Schedule D) (Form 990) 2019	FIDELCO GUI	DE DOG	FOUNDA	TION,	, INC	**-***0478 Page 3
Part VII		Other Securities.					
	Complete if the orga	anization answered "Yes"	on Form 990	, Part IV, line	11b. See	e Form 990, F	Part X, line 12.
(a) Descri		Ory (including name of security)		k value			aluation: Cost or end-of-year market value
(1) Financi	al derivatives						
. ,	held equity interests						
(3) Other	field equity interests						
(A)							
(B)			1				
(C)			1				
(D)							
(E)							
(F)							
<u>(G)</u>							
<u>(H)</u>							
		, Part X, col. (B) line 12.)					
Part VII		Program Related.					
	Complete if the orga	anization answered "Yes"			<u>11c. See</u>	Form 990, F	Part X, line 13.
	(a) Description of	investment	(b) Boo	ok value	(c)	Method of va	aluation: Cost or end-of-year market value
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
Total. (Col.	(b) must equal Form 990	, Part X, col. (B) line 13.) 🕨					
Part IX							
	Complete if the orga	anization answered "Yes"	on Form 990	, Part IV, line	11d. See	e Form 990, F	Part X, line 15.
		(a)	Description				(b) Book value
(1) HE	ELD IN TRUST	F BY OTHERS					1,681,056.
		EMAINDER TRUS	TS				219,719.
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							1,900,775.
Part X	Other Liabilitie	<u>rm 990. Part X. col. (B) lin</u> s	<u>e 75.)</u>				1,500,115.
TUITA	1					16 0	000 Datt V line 05
		anization answered "Yes" escription of liability	on Form 990	, Part IV, line	Tieori	II. See Form	(b) Book value
1.							(b) BOOK Value
	deral income taxes						
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
Total. (Coli	umn (b) must eaual Fo	rm 990. Part X. col. (B) line	e 25.)				
							ancial statements that reports the
							otnote has been provided in Part XIII

Schedule D (Form 990) 2019

932053 10-02-19

Sche	dule D (Form 990) 2019 FIDELCO GUIDE DOG FOUNDATIO	ON, IN	С	**_	***0478 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Stateme	nts With	Revenue per Re	turn.	
	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	4,944,132.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-216,699.		
b	Donated services and use of facilities				
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)		10,144.		
е	Add lines 2a through 2d			2e	-206,555.
3	Subtract line 2e from line 1			3	5,150,687.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			5	5,150,687.
Pa	t XII Reconciliation of Expenses per Audited Financial Stateme	ents With	Expenses per F	Returi	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	7,165,148.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	195,303.		
е	Add lines 2a through 2d			2e	195,303.
3	Subtract line 2e from line 1			3	6,969,845.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b				
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	6,969,845.
Pa	t XIII Supplemental Information.				
Prov	de 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)	K, line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addi	tional inforr	nation.		
PAF	RT V, LINE 4:				
			NID		22.2.16
THE	E ORGANIZATION INTENDS TO USE THE ENDOWMENT	TO FU	JND FUTURE	PRO	JKAMS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENTS EXPENSES

PENSION BENEFITS RELATED CHANGES

PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENTS EXPENSES

PENSION BENEFITS RELATED CHANGES

TOTAL TO SCHEDULE D, PART XII, LINE 2D

932054 10-02-19

10,144.

10,144.

185,159.

195,303.

	(Form 990) 2019
Dort VIII	0

Part XIII	Supplemental Information (continued)	
		Schedule D (Form 990) 2019

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	Iraisi	ng or Gaming A	ctiv	ities	OMB No. 1545-0047
(Form 990 or 990-EZ)		e organization answered "Yes" on organization entered more than \$15				r 19,	or if the	2019
Department of the Treasury		Attach to Form 990						Open to Public
Internal Revenue Service Name of the organization		to www.irs.gov/Form990 for instru	uction	s and	the latest informati	on.	Employor id	Inspection entification number
		GUIDE DOG FOUNDAT	ION	, II	NC		**_**(
		Complete if the organization answe	ered "Y	es" or	n Form 990, Part IV, I	ine 1	7. Form 990-E	Z filers are not
 Indicate whether th a Mail solicitat b Internet and c Phone solici d In-person so 2 a Did the organization key employees list 	ions email solicitations tations licitations on have a written o ed in Form 990, Pa highest paid indiv	ed funds through any of the followin e Solicitat f Solicitat g Special or oral agreement with any individual art VII) or entity in connection with pur- viduals or entities (fundraisers) pursue	tion of tion of fundra (incluc rofessi	non-g gover aising ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?		Ye	
(i) Name and addres or entity (fund		(ii) Activity	(iii) fundr have c or cor contrib	ustody itrol of	(iv) Gross receipts from activity	tò (o	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No				1
Total								
3 List all states in whi or licensing.	ich the organizatio	n is registered or licensed to solicit c	ontrib	utions	or has been notified	it is e	exempt from r	egistration
LHA For Paperwork Re	eduction Act Noti	ce, see the Instructions for Form 9	90 or	990-E	Z. 9	Sche	dule G (Form	990 or 990-EZ) 2019

932081 09-11-19

-*0478 Page 2 Schedule G (Form 990 or 990-EZ) 2019 FIDELCO GUIDE DOG FOUNDATION, INC Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000

of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

			oss income on Form 990	,	0	1
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
				MOHEGAN	1	(add col. (a) through
			INDEPENDENCE		<u>(tatal averation)</u>	col. (c))
ne			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	50,364.	21,045.	3,498.	74,907
	2	Less: Contributions	44,604.	21,045.	3,498.	69,147
	3	Gross income (line 1 minus line 2)	5,760.			5,760
	4	Cash prizes				
	5	Noncash prizes				
Expenses	6	Rent/facility costs				
Direct Ex	7	Food and beverages				
ā	0	Entertainment				
	8	Entertainment Other direct expenses		1,032.	1,104.	10,144
	10					10,144
		Net income summary. Subtract line 10 from I				-4,384
Hevenue		0	(a) Bingo	bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c
_	1	Gross revenue				
ses	2	Cash prizes				
튄						
ЩЩ	3	Noncash prizes				
Direct Exp	3 4	Noncash prizes Rent/facility costs				
Direct Expenses	4					
Direct Exp	4	Rent/facility costs	Yes%	└── Yes % └── No	☐ Yes % ☐ No	
Direct Exp	4 5 6	Rent/facility costs	No		No	
Direct Exp	4 5 6 7	Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through	h 5 in column (d)	□ No	No No	
Direct	4 5 6 7 8	Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 throug Net gaming income summary. Subtract line 7	No No	<u>No</u>	No No	
e 6 Direct	4 5 7 8 Ent	Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through	h 5 in column (d) 7 from line 1, column (d) ucts gaming activities: ctivities in each of these s	No No	No	
d e 6 Direct	4 5 7 8 Ent 1 Is t	Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 throug Net gaming income summary. Subtract line 7 ter the state(s) in which the organization conduct the organization licensed to conduct gaming a	h 5 in column (d)	No No	No	
a b	4 5 7 8 Ent 1 Is t 0 If "	Rent/facility costs	h 5 in column (d) 7 from line 1, column (d) ucts gaming activities: ctivities in each of these s	states?	No ► ear?	Yes N
a b	4 5 7 8 Ent 1 Is t 0 If "	Rent/facility costs	h 5 in column (d) 7 from line 1, column (d) ucts gaming activities: ctivities in each of these s	states?	No ► ear?	Yes N

Sch	edule G (Form 990 or 990-EZ) 2019 FIDELCO GUIDE DOG FOUNDATION, INC **-*	***0478	B Page 3
11		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	No No
13	Indicate the percentage of gaming activity conducted in:		
	The organization's facility	13a	%
	An outside facility	13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address	v	
1 5a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	 Yes	No
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount		
	of gaming revenue retained by the third party \blacktriangleright \$		
С	If "Yes," enter name and address of the third party:		
	Name		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation 🕨 💲		
	Description of services provided 🕨		
	Director/officer Employee Independent contractor		
	Mandatory distributions:		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	
D	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$		
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part	rt III, lines 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		
93208	33 09-11-19 Schedule G (Forn 32	n 990 or 990	0-EZ) 2019

Schedule G	(Form 990 or 990-EZ)	FIDELCO	GUIDE	DOG	FOUNDATION,	INC
Part IV	Supplemental Info	rmation /	0			

Part IV	Supplemental Information (continued)
	Schedule G (Form 990 or 990-EZ)

SC	HEDULE J	VB No. 1	545-004	17
(Fo	rm 990) For certain Officers, Directors, Trustees, Key Employees, and Highest	2	40	
•	Compensated Employees	ZU	IJ)
Deres	► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.	pen to	Publi	ic
	tment of the Treasury al Revenue Service ► Go to www.irs.gov/Form990 for instructions and the latest information.	Inspe	ction	
Nam	e of the organization Employer ident			nber
	FIDELCO GUIDE DOG FOUNDATION, INC **-***	047	8	
Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or	41-		
~	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,	2		
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	_	
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
Ŭ	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a	Х	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
с	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		x
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
	The organization?	6a		X X
b	Any related organization?	6b		
-	If "Yes" on line 6a or 6b, describe in Part III.			
1	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	-		X
0	not described on lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	0		X
0	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	9		
	Regulations section 53.4958-6(c)?		. 000)	

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

Schedule J (Form 990) 2019

932111 10-21-19

Schedule J (Form 990) 2019 FIDELCO	00	GUIDE DOG	FOUNDATION	I, INC	**_**0478	478		Page 2
s, Trustee	oldu	yees, and Highest C	ompensated Emple	oyees. Use duplica	te copies if additional s	space is needed.		1 5 5
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.	e rep orm 9	oorted on Schedule J 90, Part VII.	, report compensati	on from the organiz	ation on row (i) and fror	n related organizations	s, described in the instr	uctions, on row (ii).
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.	d ind	ividual must equal th	ie total amount of Fc	orm 990, Part VII, Se	ection A, line 1a, applic	able column (D) and (E) amounts for that indiv	/idual.
		(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title	•	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deterred compensation	Denems	(m)-(l)(a)	in column (b) reported as deferred on prior Form 990
(1) RICHARD PUMMELL	(i)	160,380.	.0	0.	.0	26,419.	186,799.	0.
VP, DIRECTOR OF DEVELOPMENT AND HR		•0	•0	.0	.0	•0	•0	•0
(2) ELIOT D. RUSSMAN	(i)	219,719.	.0	.0		41,595.	261,314.	0.
PRESIDENT & CEO THRU 4/30/19	: :	.0	•0	•0	•0	•0	•0	.0
(3) DOUGLAS FUCHS	(i)	140,688.	.0	0.	.0	42,145.	182,833.	.0
COO THRU 7/31/2019	(ii)	0.	• 0	• 0	0.	• 0	• 0	0.
	(i)							
	(iii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(II)							
	(i)							
	: :							
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	(i)							
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	Ξ							
	(ii)							
							Schedu	Schedule J (Form 990) 2019

932112 10-21-19

Schedule J (Form 990) 2019 FIDELCO GUIDE DOG FOUNDATION, INC	**-***0478 Page 3	е З
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.	is part for any additional information.	
	Schedule J (Form 990) 2019	019

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public

Inspection

9

Department of the Treasury
Internal Revenue Service

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

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

Name of the organization

ZU

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	FIDELCO GUID	E DOG I	FOUNDATION	I, INC	**_*	**0478	
Par	t I Types of Property						
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	•	ts
1	Art - Works of art						
2	Art - Historical treasures						
3	Art - Fractional interests						
4	Books and publications						
5	Clothing and household goods						
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property						
9	Securities - Publicly traded						
10	Securities - Closely held stock						
11	Securities - Partnership, LLC, or						
	trust interests						
12	Securities - Miscellaneous						
13	Qualified conservation contribution -						
	Historic structures						
14	Qualified conservation contribution - Other						
15	Real estate - Residential						
16	Real estate - Commercial						
17	Real estate - Other						
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other (<u>PROGRAM SUPPL</u>)	X	2	0.			
26	Other 🕨 ()						
27	Other 🕨 ()						
28	Other 🕨 ()						
29	Number of Forms 8283 received by the organiz	zation during	g the tax year for co	ontributions			
	for which the organization completed Form 828	33, Part IV, I	Donee Acknowledg	ement 29			
						Yes	No
30a	During the year, did the organization receive by						
	must hold for at least three years from the date	e of the initia	I contribution, and	which isn't required to be us	ed for		
	exempt purposes for the entire holding period?	· · · · · · · · · · · · · · · · · · ·				30a	X
b	If "Yes," describe the arrangement in Part II.						
31	Does the organization have a gift acceptance p	-	-	•	ions?	31	X
32a	Does the organization hire or use third parties of	or related or	ganizations to solid	cit, process, or sell noncash			
	contributions?					32a	X
b	If "Yes," describe in Part II.						
33	If the organization didn't report an amount in c	olumn (c) fo	r a type of property	for which column (a) is chec	ked,		

lha f	For Paperwork Reduction	Act Notice,	see the Instruc	tions for Form 990.
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Schedule M (Form 990) 2019

932141 09-27-19

Schedule M	l (Form 990) 2019	FIDELCO	GUIDE DOG	FOUNDATION,	INC	**-***0478	Page 2
Part II	Supplemental is reporting in Par this part for any ac	Information.	Provide the infor e number of contri	mation required by Part butions, the number of it		d 33, and whether the organizati combination of both. Also compl	on ete
932142 09-27-	19					Schedule M (Form S	990) 2019

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization 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.



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FIDELCO GUIDE DOG FOUNDATION, INC

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

QUALITY GUIDE DOGS.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

COMPLETE TRAINING. THE ORGANIZATION ALSO PROVIDES ANNUAL FOLLOW UP

MEETINGS AND A 24/7 HEALTH AND EMERGENCY HOT-LINE. FIDELCO PROVIDES

SUCCESSOR DOGS WHEN THE NATURAL LIFESPAN OF THE GUIDE DOG COMES TO ITS

CONCLUSION.

THE ORGANIZATION MAINTAINS A CLOSE AND COLLABORATIVE RELATIONSHIP WITH

THE INTERNATIONAL GUIDE DOG COMMUNITY, SHARING BEST PRACTICES AND

CONTRIBUTING TO THE ENHANCEMENT OF THE GUIDE DOG COLONY.

THE ORGANIZATION IS SUPPORTED BY THOUSANDS OF VOLUNTEERS WHO CONTRIBUTE

THEIR TIME TO DAILY OPERATIONS AND, IMPORTANTLY, TO THE FOSTER CARE OF

PUPPIES FOR THE FOURTEEN MONTHS NEEDED TO ALLOW THEM TO REACH THEIR

MATURITY AND READINESS TO BE TRAINED AS GUIDE DOGS. THIS TRAINING

AVERAGES 6-8 MONTHS FOR EACH DOG.

FIDELCO GUIDE DOG FOUNDATION HAS TWO CAMPUSES, WHICH INCLUDE KENNELS,

VETERINARY CARE, TRAINING AND ADMINISTRATIVE AREAS. OVER 1500 GUIDE

DOG TEAMS HAVE BEEN ENABLED, AND AN INCREASING NUMBER OF CLIENTS ARE

VETERANS.

FIDELCO GUIDE DOG TEAMS ARE AN OUTSTANDING EXAMPLE OF THE CAPABILITIES

OF BLIND PEOPLE PARTNERED WITH SPECIALLY-TRAINED GERMAN SHEPHERD DOGS

TO LIVE INDEPENDENTLY, WITH SAFETY AND DIGNITY.

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

THE AUDITED FINANCIAL STATEMENTS AND FORM 990 ARE PROVIDED TO THE CEO,

 LHA
 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990 or 990-EZ) (2019)

 932211
 09-06-19

11350426 756208 10322.001

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Schedule O (Form 990 or 990-EZ) (2019) Page 2							
Name of the organization FIDELCO GUIDE DOG FOUNDATION, INC							
CHAIR OF THE BOARD AND AUDIT COMMITTEE IN DRAFT FORM. THE	Y REVIEW THE						
DOCUMENTS AND, ONCE APPROVED, THEY ARE PRESENTED TO THE EN	TIRE BOARD. UPON						
THEIR APPROVAL, THESE ARE AVAILABLE FOR DISTRIBUTION AND F	ILING.						

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

ON AN ANNUAL BASIS, THE CORPORATE GOVERNANCE COMMITTEE DELIVERS THE CONFLICT OF INTEREST POLICY TO EACH BOARD MEMBER AND FOUNDATION OFFICERS. THE POLICY IS READ BY EACH MEMBER OF THE BOARD AND FOUNDATION OFFICERS, AND THEY ARE REQUESTED TO SIGN AN ACCEPTANCE FORM FOR THE CONFLICT OF INTEREST POLICY.

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

COMPENSATION FOR OTHER OFFICERS AND KEY EMPLOYEES ARE DETERMINED BY THE CEO, WHO REVIEWS SALARIES OF VARIOUS NON-PROFIT ORGANIZATIONS AND OTHER MARKET APPLICABLE DATA. THE PRINCIPAL OFFICER DETERMINES THE ACTUAL COMPENSATION AND/OR RAISE. COMPENSATION FOR THE CEO IS ALSO REVIEWED USING SALARIES OF VARIOUS NON-PROFIT ORGANIZATIONS AND OTHER MARKET APPLICABLE DATA, AND APPROVED BY THE BOARD.

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

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST. THE 990 IS ALSO AVAILABLE IN THE SECRETARY OF STATE'S OFFICE WHERE FILED AND ON THE INTERNET.

FORM 990, PART XII, LINE 2C

THE AUDIT COMMITTEE ASSUMES RESPONSIBILITY FOR THE OVERSIGHT OF THE

AUDIT AND SELECTION OF AN INDEPENDENT ACCOUNTANT. THIS PROCESS HAS NOT 932212 09-06-19 Schedule O (Form 990 or 990-EZ) (2019) 40 11350426 756208 10322.001 2019.05092 FIDELCO GUIDE DOG FOUNDAT 10322.01

Schedule O (F		90-EZ) (20	19)							Pag
Name of the o	rganization	FIDEI	LCO GU	IDE DO	G FOUN	DATION,	INC		Employer	identification numb ***0478
CHANGED	DURTNG	тнт	YEAR.							
	Domino									
932212 09-06-19						4 1		S	chedule O (Forr	n 990 or 990-EZ) (20

11350426 756208 10322.001

(Rev. January 2020)

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

1		File a	senarate	application	for each	n return
	_	File a	i separate	application	IUI eaci	i return.

► Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.*

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or	Name of exempt organization or other filer, see instru	Taxpaye	axpayer identification number (TIN)			
print	FIDELCO GUIDE DOG FOUNDATIO		**_**	*0478		
File by the due date fo filing your						0170
return. See instructions		oreign add	ress, see instructions.			
Enter the	e Return Code for the return that this application is for (file	e a separa	e application for each return)			
Applica	tion	Return	Application			Return
Is For		Code	Is For			Code
Form 99	0 or Form 990-EZ	01	Form 990-T (corporation)			07
Form 99	0-BL	02	Form 1041-A			08
Form 47	20 (individual)	03	Form 4720 (other than individual)			09
Form 99	0-PF	04	Form 5227			10
Form 99	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 99	0-T (trust other than above) DIANE LINDELANI	06	Form 8870			12
• If the • If this box • 1 Ir th • 2 If 1	equest an automatic 6-month extension of time until e organization named above. The extension is for the organization named above. The extension is for the organization gradient or a calendar year or calendar year or tax year beginning JUL 1, 2019 the tax year entered in line 1 is for less than 12 months, c Change in accounting period	Group Exe and atta MAX anization's , an heck reaso	mption Number (GEN) I ch a list with the names and TINs of <u>Z</u> 17, 2021 , to file return for: d ending	f this is fo all memb	r the whole ers the extern npt organiza 	group, check this
	his application is for Forms 990-BL, 990-PF, 990-T, 4720, y nonrefundable credits. See instructions.	, or 6069, e	enter the tentative tax, less	3a	\$	0.
	b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b					
c Ba	alance due. Subtract line 3b from line 3a. Include your pa	ayment wit	n this form, if required, by			
us	ing EFTPS (Electronic Federal Tax Payment System). See	e instructio	ns.	3c	\$	0.
Caution instruction	: If you are going to make an electronic funds withdrawal ons.	(direct deb	bit) with this Form 8868, see Form 84	153-EO an	d Form 887	9-EO for payment
LHA	For Privacy Act and Paperwork Reduction Act Notice,	see instru	ictions.		Form	8868 (Rev. 1-2020)

923841 12-30-19