

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

**2021**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**A** For the 2021 calendar year, or tax year beginning **JUL 1, 2021** and ending **JUN 30, 2022**

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>SEARCH GROUP, INC.</b> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>1900 POINT WEST WAY, SUITE 161</b> City or town, state or province, country, and ZIP or foreign postal code <b>SACRAMENTO, CA 95815</b> <b>F</b> Name and address of principal officer: <b>DAVID J. ROBERTS</b> <b>SAME AS C ABOVE</b>	<b>D</b> Employer identification number <b>94-2247019</b> <b>E</b> Telephone number <b>916-392-2550</b> <b>G</b> Gross receipts \$ <b>4,489,404.</b> <b>H(a)</b> Is this a group return for subordinates? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions <b>H(c)</b> Group exemption number ▶
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J</b> Website: ▶ <b>WWW.SEARCH.ORG</b>		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation: <b>1969</b> <b>M</b> State of legal domicile: <b>CA</b>

**Part I Summary**

	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>SEE SCHEDULE O</b>		
Activities & Governance	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>15</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>15</b>
	<b>5</b> Total number of individuals employed in calendar year 2021 (Part V, line 2a)	<b>5</b>	<b>21</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>15</b>
	<b>7 a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
	<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	<b>0.</b>
Revenue	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b> 377,007.	<b>Current Year</b> 920,272.
	<b>9</b> Program service revenue (Part VIII, line 2g)	3,587,633.	3,568,808.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	184.	324.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,964,824.	4,489,404.
	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
Expenses	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2,925,402.	3,040,625.
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	890,457.	1,191,114.
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,815,859.	4,231,739.
	<b>19</b> Revenue less expenses. Subtract line 18 from line 12	148,965.	257,665.
Net Assets or Fund Balances	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b> 1,990,813.	<b>End of Year</b> 1,636,523.
	<b>21</b> Total liabilities (Part X, line 26)	1,532,120.	920,165.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	458,693.	716,358.

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	Signature of officer <b>DAVID J. ROBERTS, EXECUTIVE DIRECTOR</b> Type or print name and title	Date			
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>LISA M. CUMMINGS, CPA</b>	Preparer's signature <b>LISA M. CUMMINGS, CP</b>	Date <b>05/04/23</b>	Check if self-employed <input type="checkbox"/>	PTIN <b>P00043433</b>
	Firm's name ▶ <b>COHNREZNICK LLP</b>	Firm's EIN ▶ <b>22-1478099</b>	Phone no. <b>916-442-9100</b>		
Firm's address ▶ <b>621 CAPITOL MALL, SUITE 2150 SACRAMENTO, CA 95814</b>					

May the IRS discuss this return with the preparer shown above? See instructions  Yes  No

Part 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: SEARCH IS DEDICATED TO IMPROVING THE QUALITY OF JUSTICE AND PUBLIC SAFETY THROUGH THE USE, MANAGEMENT, AND EXCHANGE OF INFORMATION, APPLICATION OF NEW TECHNOLOGIES, AND RESPONSIBLE LAW AND POLICY, WHILE SAFEGUARDING SECURITY AND PRIVACY.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 1,470,434. including grants of \$ ) (Revenue \$ 1,779,089. ) INFORMATION SHARING PROGRAM - SEE SCHEDULE O

4b (Code: ) (Expenses \$ 927,033. including grants of \$ ) (Revenue \$ 1,102,447. ) CYBERCRIME AND DIGITAL FORENSICS - SEE SCHEDULE O

4c (Code: ) (Expenses \$ 798,117. including grants of \$ ) (Revenue \$ 687,272. ) LAW & POLICY PROGRAM - SEE SCHEDULE O

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 3,195,584.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and schedules.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 22 through 38 regarding grants, compensation, tax-exempt bonds, excess benefit transactions, and controlled entities.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 17 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

**Part VI Governance, Management, and Disclosure.** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
	1a	15	
<b>b</b>	Enter the number of voting members included on line 1a, above, who are independent		
	1b	15	
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b>	Did the organization have members or stockholders?	X	
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	X	
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	X	
<b>b</b>	Each committee with authority to act on behalf of the governing body?		X
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		X
<b>b</b>	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
<b>10b</b>			
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		X
<b>b</b>	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
<b>b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done		X
<b>12c</b>			
<b>13</b>	Did the organization have a written whistleblower policy?	X	
<b>14</b>	Did the organization have a written document retention and destruction policy?		X
<b>15</b>	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
<b>a</b>	The organization's CEO, Executive Director, or top management official		X
<b>b</b>	Other officers or key employees of the organization		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>b</b>	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
<b>16b</b>			

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **CA**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website     Another's website     Upon request     Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **TIMOTHY LOTT - 916-392-2550**  
**1900 POINT WEST WAY, SUITE 161, SACRAMENTO, CA 95815**

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

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

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

**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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the 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) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DAVID J ROBERTS EXECUTIVE DIRECTOR	40.00			X			181,235.	0.	15,612.	
(2) MARK D PERBIX DIRECTOR OF PROGRAMS	40.00				X		145,875.	0.	27,834.	
(3) TIMOTHY LOTT DIR OF OPERATIONS/HIGH-TECH CRIME	40.00				X		145,291.	0.	17,964.	
(4) MOSIAH WEST INFORMATION SHARING SPECIALIST	40.00				X		112,796.	0.	34,740.	
(5) HAIQI WEI INFORMATION SHARING SPECIALIST	40.00				X		119,415.	0.	0.	
(6) LAUREN MAURHOFF HTC PROGRAMS MANAGER	40.00				X		106,198.	0.	11,376.	
(7) ADAM DEAN DIRECTOR	0.50	X					0.	0.	0.	
(8) BRADLEY ROLLO DIRECTOR	0.50	X					0.	0.	0.	
(9) DANIEL FORO DIRECTOR	0.50	X					0.	0.	0.	
(10) ERIN HENRY DIRECTOR	0.50	X					0.	0.	0.	
(11) JASON BRIGHT CHAIR	0.50	X		X			0.	0.	0.	
(12) JEFFREY SEDGWICK DIRECTOR	0.50	X					0.	0.	0.	
(13) LEILA MCNEILL DIRECTOR	0.50	X					0.	0.	0.	
(14) LESLIE MOORE DIRECTOR	0.50	X					0.	0.	0.	
(15) LISA VOSS VICE CHAIR	0.50	X		X			0.	0.	0.	
(16) LT COL LARRY NEWTON DIRECTOR	0.50	X					0.	0.	0.	
(17) MATT RUEL DIRECTOR	0.50	X					0.	0.	0.	

**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) MICHELLE FARRIS DIRECTOR	0.50	X						0.	0.	0.
(19) MICHELLE KLECKLER DIRECTOR	0.50	X						0.	0.	0.
(20) ROBERT WESSELS DIRECTOR	0.50	X						0.	0.	0.
(21) CHRISTOPHER YOUNG DIRECTOR	0.50	X						0.	0.	0.
<b>1b Subtotal</b> .....								810,810.	0.	107,526.
<b>c Total from continuation sheets to Part VII, Section A</b> .....								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b> .....								810,810.	0.	107,526.

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **6**

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> .....		X
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> .....	X	
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> .....		X

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
CARPE VERITAS DIGITAL FORENSICS, LLC 2850 DEL RIO AVE SE, ALBANY, OR 97322	DIGITAL FORENSIC CONSULTING	298,802.
UNIVERSITY OF MARYLAND COLLEGE PARK UNIVERSITY BLVD, COLLEGE PARK, MD 20742	STATISTICAL ANALYSIS	108,432.

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **2**

**Part VIII Statement of Revenue**

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	<b>1 a</b> Federated campaigns	<b>1a</b>					
	<b>b</b> Membership dues	<b>1b</b>	404,443.				
	<b>c</b> Fundraising events	<b>1c</b>					
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>	515,829.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>					
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$				
	<b>h Total.</b> Add lines 1a-1f			920,272.			
Program Service Revenue	<b>2 a</b> FEDERAL CONTRACTS	Business Code	541900	1,789,652.	1,789,652.		
	<b>b</b> OTHER CONTRACTS		541900	1,684,757.	1,684,757.		
	<b>c</b> SPONSORSHIPS/MISC		900099	94,399.	94,399.		
	<b>d</b>						
	<b>e</b>						
	<b>f</b> All other program service revenue						
	<b>g Total.</b> Add lines 2a-2f			3,568,808.			
Other Revenue	<b>3</b> Investment income (including dividends, interest, and other similar amounts)			324.		324.	
	<b>4</b> Income from investment of tax-exempt bond proceeds						
	<b>5</b> Royalties						
	<b>6 a</b> Gross rents	<b>6a</b>	(i) Real				
			(ii) Personal				
	<b>b</b> Less: rental expenses	<b>6b</b>					
	<b>c</b> Rental income or (loss)	<b>6c</b>					
	<b>d</b> Net rental income or (loss)						
	<b>7 a</b> Gross amount from sales of assets other than inventory	<b>7a</b>	(i) Securities				
			(ii) Other				
	<b>b</b> Less: cost or other basis and sales expenses	<b>7b</b>					
	<b>c</b> Gain or (loss)	<b>7c</b>					
<b>d</b> Net gain or (loss)							
<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	<b>8a</b>						
<b>b</b> Less: direct expenses	<b>8b</b>						
<b>c</b> Net income or (loss) from fundraising events							
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19	<b>9a</b>						
<b>b</b> Less: direct expenses	<b>9b</b>						
<b>c</b> Net income or (loss) from gaming activities							
<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>						
<b>b</b> Less: cost of goods sold	<b>10b</b>						
<b>c</b> Net income or (loss) from sales of inventory							
Miscellaneous Revenue	<b>11 a</b>	Business Code					
	<b>b</b>						
	<b>c</b>						
	<b>d</b> All other revenue						
	<b>e Total.</b> Add lines 11a-11d						
<b>12 Total revenue.</b> See instructions			4,489,404.	3,568,808.	0.	324.	

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...				
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 .....				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 .....				
<b>4</b> Benefits paid to or for members .....				
<b>5</b> Compensation of current officers, directors, trustees, and key employees .....	229,553.	170,230.	59,323.	
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....				
<b>7</b> Other salaries and wages .....	2,086,494.	1,548,266.	538,228.	
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) .....	207,038.	153,067.	53,971.	
<b>9</b> Other employee benefits .....	341,215.	252,268.	88,947.	
<b>10</b> Payroll taxes .....	176,325.	130,360.	45,965.	
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management .....				
<b>b</b> Legal .....				
<b>c</b> Accounting .....				
<b>d</b> Lobbying .....				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees .....				
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	707,109.	617,039.	90,070.	
<b>12</b> Advertising and promotion .....	3,561.	2,815.	746.	
<b>13</b> Office expenses .....	141,288.	71,220.	70,068.	
<b>14</b> Information technology .....	36,916.	27,451.	9,465.	
<b>15</b> Royalties .....				
<b>16</b> Occupancy .....				
<b>17</b> Travel .....	176,557.	157,459.	19,098.	
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
<b>19</b> Conferences, conventions, and meetings .....	58,922.	28,966.	29,956.	
<b>20</b> Interest .....				
<b>21</b> Payments to affiliates .....				
<b>22</b> Depreciation, depletion, and amortization .....	4,823.	3,813.	1,010.	
<b>23</b> Insurance .....	35,046.	16,965.	18,081.	
<b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
<b>a DUES &amp; SUBSCRIPTIONS</b>	25,783.	15,128.	10,655.	
<b>b TAXES &amp; FILING FEES</b>	1,109.	537.	572.	
<b>c</b> _____				
<b>d</b> _____				
<b>e</b> All other expenses _____				
<b>25 Total functional expenses.</b> Add lines 1 through 24e	4,231,739.	3,195,584.	1,036,155.	0.
<b>26 Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here  if following SOP 98-2 (ASC 958-720)

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	399,421.	<b>1</b>	324,273.
	<b>2</b> Savings and temporary cash investments .....	653,335.	<b>2</b>	351,601.
	<b>3</b> Pledges and grants receivable, net .....	199,389.	<b>3</b>	77,054.
	<b>4</b> Accounts receivable, net .....	392,389.	<b>4</b>	404,028.
	<b>5</b> 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 .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	79,159.	<b>9</b>	71,736.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 59,303.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 44,501.	19,346.	<b>10c</b> 14,802.
	<b>11</b> Investments - publicly traded securities .....		<b>11</b>	
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	247,774.	<b>15</b>	393,029.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	1,990,813.	<b>16</b>	1,636,523.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	524,072.	<b>17</b>	369,826.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....	492,219.	<b>19</b>	550,339.
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> 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 .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....	515,829.	<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....		<b>25</b>	
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	1,532,120.	<b>26</b>	920,165.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	458,693.	<b>27</b>	716,358.
	<b>28</b> Net assets with donor restrictions .....		<b>28</b>	
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	458,693.	<b>32</b>	716,358.
<b>33</b> Total liabilities and net assets/fund balances .....	1,990,813.	<b>33</b>	1,636,523.	

**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,489,404.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,231,739.
3	Revenue less expenses. Subtract line 2 from line 1	3	257,665.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	458,693.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain 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	716,358.

**Part XII Financial Statements and Reporting**

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

- 1 Accounting method used to prepare the Form 990:  Cash  Accrual  Other \_\_\_\_\_  
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant? .....  
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
- b Were the organization's financial statements audited by an independent accountant? .....  
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? .....  
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? .....
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits .....

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

Form 990 (2021)



**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	243,750.	320,120.	362,912.	377,007.	920,272.	2224061.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	243,750.	320,120.	362,912.	377,007.	920,272.	2224061.
<b>5</b> 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) .....						
<b>6 Public support.</b> Subtract line 5 from line 4.						2224061.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>7</b> Amounts from line 4 .....	243,750.	320,120.	362,912.	377,007.	920,272.	2224061.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	1,949.	6,237.	2,835.	184.	324.	11,529.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....	26,285.					26,285.
<b>11 Total support.</b> Add lines 7 through 10						2261875.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	17,121,227.
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)) .....	<b>14</b>	98.33 %
<b>15</b> Public support percentage from 2020 Schedule A, Part II, line 14 .....	<b>15</b>	96.97 %
<b>16a 33 1/3% support test - 2021.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2020.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2021.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2020.</b> 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 the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>

**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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</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 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2020 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2020 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2021.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**b 33 1/3% support tests - 2020.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
<b>b</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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
<b>c</b> 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)? <i>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.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c 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).</i>		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> 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? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> 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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>9a</b> 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))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</b> Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> 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)? <i>If "Yes," answer line 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? Row 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?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 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? Row 3: By reason of the relationship described on line 2, above, 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?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( *explain in Part VI*). See instructions.  
 All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section 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	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

Section 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):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
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 0.015 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 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

<b>Section D - Distributions</b>		<b>Current Year</b>
<b>1</b>	Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>
<b>2</b>	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>
<b>3</b>	Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>
<b>4</b>	Amounts paid to acquire exempt-use assets	<b>4</b>
<b>5</b>	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	<b>5</b>
<b>6</b>	Other distributions (describe in Part VI). See instructions.	<b>6</b>
<b>7</b>	<b>Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>
<b>8</b>	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	<b>8</b>
<b>9</b>	Distributable amount for 2021 from Section C, line 6	<b>9</b>
<b>10</b>	Line 8 amount divided by line 9 amount	<b>10</b>

<b>Section E - Distribution Allocations</b> (see instructions)	<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2021</b>	<b>(iii) Distributable Amount for 2021</b>
<b>1</b> Distributable amount for 2021 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2021 (reasonable cause required - explain in Part VI). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2021			
<b>a</b> From 2016			
<b>b</b> From 2017			
<b>c</b> From 2018			
<b>d</b> From 2019			
<b>e</b> From 2020			
<b>f</b> Total of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2021 distributable amount			
<b>i</b> Carryover from 2016 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2021 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2021 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
<b>6</b> Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
<b>7</b> <b>Excess distributions carryover to 2022.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2017			
<b>b</b> Excess from 2018			
<b>c</b> Excess from 2019			
<b>d</b> Excess from 2020			
<b>e</b> Excess from 2021			

Schedule A (Form 990) 2021

**Part VI** **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

MISCELLANEOUS INCOME

2017 AMOUNT: \$ 26,285.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization SEARCH GROUP, INC. Employer identification number 94-2247019

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two Yes/No questions regarding donor property and grant fund usage.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Form with multiple sections: 1. Purpose(s) of conservation easements (checkboxes for land, habitat, open space, historic area, structure). 2. Conservation contribution details (2a-2d table). 3-7. Monitoring and enforcement details. 8-9. Reporting requirements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Form with sections 1a-1b and 2. 1a: Reporting requirements for public exhibition. 1b: Reporting requirements for public service. 2: Reporting requirements for financial gain.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a  Public exhibition
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange program
  - e  Other \_\_\_\_\_
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 1f     |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

**Part V Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment \_\_\_\_\_%
  - b Permanent endowment \_\_\_\_\_%
  - c Term endowment \_\_\_\_\_%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |   | Yes    | No |
|---|--------|----|
| (i) Unrelated organizations   | 3a(i)  |    |
| (ii) Related organizations  | 3a(ii) |    |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b     |    |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		59,303.	44,501.	14,802.
e Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				14,802.

**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives .....		
(2) Closely held equity interests .....		
(3) Other .....		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) CASH DESIGNATED FOR RESERVE	393,029.
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	393,029.

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ...

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements .....	<b>1</b>	4,489,404.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments .....	<b>2a</b>	
<b>b</b>	Donated services and use of facilities .....	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants .....	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.) .....	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> .....	<b>2e</b>	0.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> .....	<b>3</b>	4,489,404.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b .....	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.) .....	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> .....	<b>4c</b>	0.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.) .....	<b>5</b>	4,489,404.

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements .....	<b>1</b>	4,231,739.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities .....	<b>2a</b>	
<b>b</b>	Prior year adjustments .....	<b>2b</b>	
<b>c</b>	Other losses .....	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.) .....	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> .....	<b>2e</b>	0.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> .....	<b>3</b>	4,231,739.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b .....	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.) .....	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> .....	<b>4c</b>	0.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.) .....	<b>5</b>	4,231,739.

**Part XIII Supplemental Information.**

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

**PART X, LINE 2:**

SEARCH HAS APPLIED FOR AND RECEIVED A DETERMINATION LETTER FROM THE INTERNAL REVENUE SERVICE ("IRS") TO BE TREATED AS A TAX-EXEMPT ENTITY PURSUANT TO SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND DID NOT HAVE ANY UNRELATED BUSINESS INCOME FOR THE YEAR ENDED JUNE 30, 2022. DUE TO ITS TAX-EXEMPT STATUS, SEARCH IS NOT SUBJECT TO INCOME TAXES. SEARCH IS REQUIRED TO FILE TAX RETURNS WITH THE IRS AND OTHER TAXING AUTHORITIES. ACCORDINGLY, THESE FINANCIAL STATEMENTS DO NOT REFLECT A PROVISION FOR INCOME TAXES AND SEARCH HAS NO OTHER TAX POSITIONS WHICH MUST BE CONSIDERED FOR DISCLOSURE. SEARCH IS SUBJECT TO ROUTINE AUDITS BY TAXING JURISDICTIONS; HOWEVER, THERE ARE CURRENTLY NO AUDITS FOR ANY TAX PERIODS IN PROGRESS. MANAGEMENT BELIEVES IT IS NO LONGER SUBJECT TO INCOME TAX

**Part XIII** Supplemental Information *(continued)*

EXAMINATIONS FOR YEARS PRIOR TO 2019.

Multiple horizontal lines for supplemental information.

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

**2021**

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees  
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.  
 ▶ Attach to Form 990.  
 ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

Name of the organization

**SEARCH GROUP, INC.**

Employer identification number

**94-2247019**

**Part I Questions Regarding Compensation**

**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.

- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use   |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence   |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees     |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> 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 reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain .....

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? .....

**3** Indicate which, if any, of the following the organization used to establish the compensation of the organization's 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.

- |  |   |
|--|---|
| <input type="checkbox"/> Compensation committee              | <input type="checkbox"/> Written employment contract                                |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> 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:

- a** Receive a severance payment or change-of-control payment? .....
- b** Participate in or receive payment from a supplemental nonqualified retirement plan? .....
- c** Participate in or receive payment from an equity-based compensation arrangement? .....
- 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:

- a** The organization? .....
- b** Any related organization? .....
- 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:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III .....

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III .....

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....

	Yes	No
<b>1b</b>		
<b>2</b>		
<b>4a</b>		<b>X</b>
<b>4b</b>		<b>X</b>
<b>4c</b>		<b>X</b>
<b>5a</b>		<b>X</b>
<b>5b</b>		<b>X</b>
<b>6a</b>		<b>X</b>
<b>6b</b>		<b>X</b>
<b>7</b>		<b>X</b>
<b>8</b>		<b>X</b>
<b>9</b>		

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

Schedule J (Form 990) 2021

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) DAVID J ROBERTS EXECUTIVE DIRECTOR	(i)	176,760.	0.	4,475.	0.	15,612.	196,847.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MARK D PERBIX DIRECTOR OF PROGRAMS	(i)	142,348.	0.	3,527.	0.	27,834.	173,709.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) TIMOTHY LOTT DIR OF OPERATIONS/HIGH-TECH CRIME	(i)	144,831.	0.	460.	0.	17,964.	163,255.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**Part III Supplemental Information**

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

**PART I, LINE 3:**

THE BOARD OF DIRECTORS COMPLETES A MID-YEAR PERFORMANCE REVIEW AND AN ANNUAL PERFORMANCE APPRAISAL.

IN TERMS OF THE METHODS THE BOARD OF DIRECTORS USES TO ESTABLISH THE COMPENSATION OF THE ORGANIZATION'S CEO/EXECUTIVE DIRECTOR, THE FOLLOWING PROCESSES ARE USED:

THE FULL BOARD OF DIRECTORS REVIEWS AND DECIDES ON THE COMPENSATION, RATHER THAN A COMPENSATION COMMITTEE, THOUGH THE BOARD DOES NOW HAVE A COMMITTEE ON EXECUTIVE DIRECTOR PERFORMANCE, COMPENSATION, AND SUCCESSION PLANNING. THAT COMMITTEE WAS APPOINTED ON DECEMBER 1, 2022.

THE COMMITTEE REVIEWS THE COMPENSATION OF OTHER, COMPARABLE POSITIONS THROUGH EXAMINATION OF THE 990 FORMS OF THE ORGANIZATIONS, AS WELL AS OTHER FACTORS. THE BOARD DOES NOT HAVE A WRITTEN EMPLOYMENT CONTRACT WITH THE CEO/EXECUTIVE DIRECTOR. THE BOARD LOOKS AT A VARIETY OF FACTORS (AS NOTED ABOVE) IN COMPLETING THEIR ASSESSMENT OF COMPENSATION. THE BOARD APPROVES THE COMPENSATION.

**SCHEDULE O  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**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 Form 990-EZ.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2021**

Open to Public  
Inspection

Name of the organization

SEARCH GROUP, INC.

Employer identification number

94-2247019

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

SEARCH IS DEDICATED TO IMPROVING THE QUALITY OF JUSTICE AND PUBLIC  
SAFETY THROUGH THE USE, MANAGEMENT AND EXCHANGE OF INFORMATION,  
APPLICATION OF NEW TECHNOLOGIES, AND RESPONSIBLE LAW AND POLICY WHILE  
SAFEGUARDING SECURITY AND PRIVACY.

**FORM 990, PART III, LINE 4A, DESCRIPTION OF PROGRAM SERVICE:**

SEARCH'S INFORMATION SHARING PROGRAM (ISP) HELPS STATE, LOCAL, AND  
TRIBAL CRIMINAL JUSTICE AND PUBLIC SAFETY AGENCIES AND ORGANIZATIONS  
DEVELOP, OPERATE, SECURE, AND IMPROVE INFORMATION SHARING WITHIN AND  
BETWEEN JURISDICTIONS. THIS ASSISTANCE IS PROVIDED THROUGH CONSULTING  
SERVICES AND OTHER RESOURCES IN THE AREAS OF INFORMATION SHARING  
SYSTEMS DESIGN AND DEVELOPMENT, TECHNOLOGY PROCUREMENT, IMPLEMENTATION,  
AND INTEROPERABILITY. ISP PERFORMS THREE CORE SERVICES: 1) TECHNICAL  
ASSISTANCE (CONSULTING) AND TRAINING FOCUSING ON TECHNOLOGY  
ASSESSMENTS, BUSINESS PROCESS ANALYSIS, STRATEGIC PLANNING, INFORMATION  
SHARING PLANNING AND GOVERNANCE, AND AUTOMATION REQUIREMENTS FOR  
CRIMINAL JUSTICE DATA SHARING INITIATIVES, 2) PARTICIPATION IN  
DEVELOPING AND PROMOTING NATIONAL INFORMATION STANDARDS THROUGH  
RESEARCH AND PUBLICATIONS (INCLUDING DEVELOPING AND IMPLEMENTING  
AUTOMATED INFORMATION SHARING SOLUTIONS THAT CONFORM TO NATIONAL  
STANDARDS AND BEST PRACTICES); AND, 3) SUPPORT FOR COMMUNICATIONS  
INTEROPERABILITY AND FIRSTNET. ISP WORKED WITH THE STATE OF HAWAII TO  
INTEGRATE SEARCHING FOR LAW ENFORCEMENT INCIDENT RECORDS INTO AN  
EXISTING FEDERATED QUERY PORTAL. ISP CONTINUES TO PROVIDE TECHNICAL  
SUPPORT TO THE INTERSTATE COMMISSION FOR ADULT OFFENDER SUPERVISION TO

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

Schedule O (Form 990) 2021

132211 11-11-21

Name of the organization SEARCH GROUP, INC.	Employer identification number 94-2247019
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PROVIDE NOTIFICATIONS OF HIGH RISK OFFENDERS TRANSFERRING FROM ONE STATE TO ANOTHER.

### 1. TECHNICAL ASSISTANCE

ISP PROVIDES TECHNICAL ASSISTANCE ADDRESSING A RANGE OF TOPICS INCLUDING ESTABLISHING INFORMATION SHARING GOVERNANCE STRUCTURES, DEVELOPING STRATEGIC PLANS, ASSESSING TECHNICAL AND OPERATIONAL CAPABILITIES, ASSESSING READINESS FOR INFORMATION SHARING, ASSISTING IN THE DEVELOPMENT OF RFPS, AND DESIGNING INFORMATION SHARING SOLUTIONS THAT CONFORM TO NATIONAL STANDARDS AND BEST PRACTICES. DURING THE REPORTING PERIOD ISP STAFF ASSISTED THE VIRGINIA STATE POLICE IN REVIEWING TECHNICAL REQUIREMENTS OF AN RFP TO REPLACE KEY CRIMINAL JUSTICE INFORMATION SYSTEM COMPONENTS INCLUDING THEIR COMPUTERIZED CRIMINAL HISTORY (CCH) SYSTEM, AUTOMATED FINGERPRINT IDENTIFICATION SYSTEM (AFIS) AND STATE MESSAGE SWITCH.

### 2. RESEARCH AND PUBLICATIONS SUPPORTING NATIONAL CRIMINAL JUSTICE STANDARDS AND INFORMATION SHARING

ISP STAFF PARTICIPATED IN MEETINGS AND CONFERENCE CALLS THROUGHOUT THE YEAR SERVING ON MULTIPLE NATIONAL CRIMINAL JUSTICE STANDARDS-SETTING AND ADVISORY BODIES. ISP SUPPORTED THREE RESEARCH STUDIES RELATED TO THE ANALYSIS OF CRIMINAL HISTORY DATA AND ONE RESEARCH STUDY RELATED TO RECIDIVISM.

ISP WORKED ON A PUBLICATION TO SUPPORT DATA DASHBOARD DEVELOPMENT BY LAW ENFORCEMENT AGENCIES AND EVALUATED DATA QUALITY FOR THE NATIONAL

Name of the organization SEARCH GROUP, INC.	Employer identification number 94-2247019
--	--

CRIMINAL INCIDENT REPORTING SYSTEM. SPECIFICALLY, SEARCH PARTNERED WITH THE POLICE EXECUTIVE RESEARCH FORUM (PERF) AND THE OFFICE OF COMMUNITY ORIENTED POLICING SERVICES (COPS OFFICE) ON A PROJECT TO HELP LAW ENFORCEMENT TAKE ADVANTAGE OF CRITICAL INCIDENT DATA THROUGH THE DEVELOPMENT OF INFORMATION DASHBOARDS.

THE GOAL OF THE DASHBOARD PROJECT IS TO PRODUCE TWO COMPLEMENTARY GUIDES TO HELP DEPARTMENTS USE DATA TO IMPROVE POLICE OPERATIONS AND COMMUNITY RELATIONS: ONE GUIDE FOCUSES ON FUNCTIONAL REQUIREMENTS FOR DASHBOARDS AND THE OTHER GUIDE FOCUSES ON TECHNICAL REQUIREMENTS FOR BUILDING AND SUSTAINING THEM.

### 3. COMMUNICATIONS INTEROPERABILITY

ISP STAFF CONTINUED TO SUPPORT NATIONAL EFFORTS TO PROMOTE COMMUNICATIONS INTEROPERABILITY THROUGH PARTICIPATION IN THE FIRSTNET PUBLIC SAFETY ADVISORY COMMITTEE (PSAC) AND SAFECOM EMERGENCY RESPONSE COUNCIL (ERC).

#### FORM 990, PART III, LINE 4B, DESCRIPTION OF PROGRAM SERVICE:

SEARCH'S CYBERCRIME AND DIGITAL FORENSICS CONSISTS OF A TEAM OF EXPERTS WHO PROVIDE TECHNICAL ASSISTANCE AND TRAINING TO LOCAL, STATE, AND FEDERAL JUSTICE PUBLIC SAFETY AGENCIES NATIONWIDE. THROUGH TRAINING CLASSES, TECHNICAL WORKSHOPS, AND HAND-ON ASSISTANCE, SEARCH TRAINS AND ASSISTS INVESTIGATORS IN METHODS TO PREVENT, DETECT AND INVESTIGATE THE RISING TIDE OF COMPUTER CRIME, ALSO REFERRED TO AS E-CRIME, CYBERCRIME OR HIGH-TECH CRIME. THESE CRIMES INCLUDE FRAUD, EMAIL THREATS, ONLINE STALKING, IDENTITY THEFT, PHISHING, DRUG TRAFFICKING, CYBER TERRORISM

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AND CHILD EXPLOITATION. DURING FY21/22, SEARCH CDF STAFF-

1. TRAINED MORE THAN 2700 LAW ENFORCEMENT PROFESSIONALS IN CLASSROOM AND CONFERENCE WORKSHOP SETTINGS THROUGHOUT THE NATION. THE TOPICS INCLUDED: ONLINE INVESTIGATIONS: TOOLS, TIPS AND TECHNIQUES; CORE SKILLS FOR THE INVESTIGATION OF MOBILE DEVICES; WINDOWS FORENSIC ENVIRONMENT FOR ON-SCENE TRIAGE; HUMAN TRAFFICKING: USING THE INTERNET TO INVESTIGATE YOUR CASE; MOBILE DEVICES: WHAT EVIDENCE IS AVAILABLE TO CORROBORATE YOUR CASE; SEARCHING SOCIAL MEDIA SITES FOR EVIDENCE, AND MORE. STAFF ALSO PRESENTED AT SEVERAL NATIONAL OR REGIONAL HIGH-TECH CRIME CONFERENCES.

TO ENSURE THAT STUDENTS RECEIVE THE MOST UP-TO-DATE INFORMATION AND TECHNIQUES, SEARCH STAFF CONTINUOUSLY UPDATES COURSE CURRICULA TO INCLUDE THE MOST RECENT INFORMATION AND INNOVATIONS IN THE FIELD. STAFF ALSO MAINTAINS THE EQUIPMENT IN MULTIPLE MOBILE TRAINING LABORATORIES, TO ENSURE THAT STUDENTS ARE WORKING WITH THE LATEST SOFTWARE AND HARDWARE AVAILABLE.

2. RESPONDED TO OVER 420 REQUESTS FOR TECHNICAL ASSISTANCE FROM LAW ENFORCEMENT THROUGHOUT THE NATION. THIS ASSISTANCE INCLUDED IDENTIFYING THE LEGAL CONTACT FOR VARIOUS INTERNET SERVICE PROVIDERS (ISP), HELPING EXTRACT DATA FROM MOBILE DEVICES, CAPTURING DIGITAL EVIDENCE FROM WEBPAGES, AND ADVISING ON DIGITAL EVIDENCE TRIAGE.

3. PRODUCES RESOURCES TO ASSIST LAW ENFORCEMENT PERSONNEL WITH INVESTIGATIONS INVOLVING DIGITAL EVIDENCE. THIS INCLUDED:

A. DISTRIBUTING MORE THAT 7,500 PUBLICATIONS TO LAW ENFORCEMENT

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AGENCIES ACROSS THE NATION.

B. PROVIDING ACCESS TO ONLINE TRAINING TO MORE THAN 100 LAW ENFORCEMENT PROFESSIONALS.

C. MAINTAINING THE SEARCH INVESTIGATIVE AND FORENSIC TOOLBAR, WHICH PROVIDES LAW ENFORCEMENT PROFESSIONALS WITH QUICK LINKS TO A VAST NETWORK OF RESOURCES REGARDING TECHNOLOGY-FACILITATED CRIME.

I. SEARCH STAFF CONTINUES TO UPDATE THE TOOLBAR FOR THE FIREFOX, CHROME AND SAFARI WEB BROWSERS. EACH OF THESE WEB BROWSERS REGULARLY CHANGE THEIR FUNCTIONALITY REQUIRING CONSISTENT UPDATES TO THE TOOLBAR. BETWEEN JULY 1, 2021 AND JUNE 30, 2022, THE SEARCH TOOLBAR IS UTILIZED BY OVER 8,500 LAW ENFORCEMENT PROFESSIONALS.

D. THROUGH SEARCH'S ON-LINE LEARNING PORTAL (SOLP), SEARCH HAS CONTINUED TO PROVIDE ACCESS TO ITS PRE-RECORDED AND LIVE WEBINAR SERIES.

FORM 990, PART III, LINE 4C, DESCRIPTION OF PROGRAM SERVICE:

NATIONAL CRIMINAL HISTORY IMPROVEMENT TECHNICAL ASSISTANCE PROGRAM

SEARCH'S LAW AND POLICY (L&P) PROGRAM PROVIDES TECHNICAL ASSISTANCE TO STATES AND FEDERAL ENTITIES UNDER THE NATIONAL CRIMINAL HISTORY IMPROVEMENT PROGRAM (NCHIP) TO ENHANCE AND IMPROVE CRIMINAL HISTORY SYSTEMS AND RELATED RECORDS. DIRECT ONSITE AND IN-HOUSE TECHNICAL ASSISTANCE INCLUDES SUPPORTING STATES, LOCAL JURISDICTIONS, AND TRIBES IN: 1) IMPROVING THE ACCURACY AND COMPLETENESS OF CRIMINAL HISTORY RECORDS TO SUPPORT BOTH CRIMINAL JUSTICE AND NONCRIMINAL JUSTICE PURPOSES; 2) IMPLEMENTING MULTIAGENCY AND MULTIJURISDICTIONAL INFORMATION EXCHANGES TO IMPROVE CRIMINAL RECORDS AND TO SUPPORT TACTICAL AND STRATEGIC DECISION-MAKING; 3) EXPANDING AND ENHANCING

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**ANALYTICAL CAPABILITIES USING EXISTING RECORDS MANAGEMENT SYSTEMS AND OTHER ADMINISTRATIVE DATA SETS; AND 4) INCREASING THE NUMBER OF QUALIFYING RECORDS SUBMITTED TO THE NATIONAL INSTANT CRIMINAL BACKGROUND CHECK SYSTEM (NICS) INDEX.**

**SEARCH COMPLETED 63 SHORT-TERM, IN-HOUSE TECHNICAL ASSISTANCE PROJECTS FROM JULY 1, 2021 JUNE 30, 2022. SEARCH STAFF PROVIDED THESE TA SERVICES TO 215 INDIVIDUALS IN 24 STATES. INFORMATION WAS PROVIDED TO 10 GOVERNMENT AGENCIES, 14 INDIVIDUAL CITIZENS, ONE NEWS OUTLET AND 7 NONPROFIT ORGANIZATIONS.**

**2020 REPOSITORY OPERATIONS SURVEY**

**DURING THE REPORTING PERIOD, BJS COMPLETED THE SURVEY OF STATE CRIMINAL HISTORY INFORMATION SYSTEMS, 2020. THE SURVEY WAS CONDUCTED BY SEARCH, THE NATIONAL CONSORTIUM FOR JUSTICE INFORMATION AND STATISTICS, WITH SUPPORT OF BJS, OFFICE OF JUSTICE PROGRAMS, U.S. DEPARTMENT OF JUSTICE. AS PART OF ITS NATIONAL CRIMINAL HISTORY IMPROVEMENT PROGRAM (NCHIP), BJS HAS SUPPORTED THESE BIENNIAL SURVEYS SINCE 1989, TOGETHER WITH SUBSTANTIAL DIRECT FUNDING TO STATES AND TERRITORIES TO IMPROVE THE QUALITY, TIMELINESS, AND ACCESSIBILITY OF CRIMINAL HISTORY AND RELATED RECORDS, AND A HOST OF OTHER RESEARCH, CONFERENCES, WORKSHOPS, AND TECHNICAL ASSISTANCE.**

**THE 2020 REPORT PROVIDES RESULTS FROM A SURVEY OF THE ADMINISTRATORS OF STATE CRIMINAL HISTORY RECORDS REPOSITORIES CONDUCTED FOR CALENDAR YEAR INFORMATION ENDING DECEMBER 31, 2020. SEARCH SURVEYED 56 JURISDICTIONS, INCLUDING THE 50 STATES, THE DISTRICT OF COLUMBIA, AND THE TERRITORIES.**

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ALL 50 STATES, THE DISTRICT OF COLUMBIA, AND GUAM SUBMITTED SURVEY  
RESPONSES.

THE SURVEY FINDINGS ARE VERY DETAILED AND PROVIDE INSIGHT INTO THE  
VOLUME OF RECORDS AND TRANSACTIONS PROCESSED BY REPOSITORIES,  
OPERATIONAL POLICIES AND BEST PRACTICES, LEVELS OF AUTOMATION, MEASURES  
OF DATA QUALITY AND TIMELINESS, TYPES OF RECORDS AND SYSTEMS  
MAINTAINED, COMPUTERIZED CRIMINAL HISTORY (CCH) SYSTEM ANALYTICS,  
SEALING AND EXPUNGEMENT PRACTICES AND MORE.

FBI JOINT TASK FORCE (JTF) ON RAP SHEET STANDARDIZATION

SEARCH STAFF PARTICIPATED IN FOUR JTF MEETINGS DURING THE REPORTING  
PERIOD. BASED ON A REVIEW OF OVER 200 RAP SHEETS FROM 43 STATES, SEARCH  
COMPILED A LIST OF POTENTIAL NEW DATA ELEMENTS FOR THE JTF RAP SHEET  
SPECIFICATION FOR CONSIDERATION BY THE JTF. SEARCH ALSO IDENTIFIED  
EIGHT EXAMPLE RAP SHEETS THAT CONTAIN INFORMATION OF INTEREST TO TASK  
FORCE MEMBERS. STAFF PROVIDED SAMPLE RAP SHEETS AND SEARCH RAP SHEET  
ASSESSMENTS TO THE TASK FORCE. SEARCH REVIEWED THE CONSOLIDATED MAPPING  
SPREADSHEET TO IDENTIFY UNUSED DATA ELEMENTS IN THE CURRENT JTF  
SPECIFICATION THAT COULD POTENTIALLY BE ELIMINATED AND PROVIDED THEM TO  
THE TASK FORCE FOR REVIEW.

COMPUTERIZED CRIMINAL HISTORY (CCH) ANALYTICS TOOLSET

STAFF CONTINUED TO REFINE THE CAPABILITIES OF THE COMPUTERIZED CRIMINAL  
HISTORY CCH ANALYTICS TOOLSET. THE TOOLS BEING DESIGNED BY SEARCH ARE  
INTENDED TO ASSIST CCH REPOSITORY PERSONNEL IMPROVE DAY-TO-DAY

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OPERATIONS BY: 1) DETECTING DATA SUBMISSION ANOMALIES FROM CONTRIBUTING AGENCIES TO IDENTIFY POTENTIAL CONNECTIVITY PROBLEMS AND DATA QUALITY ISSUES; 2) ALLOWING CCH STAFF TO ANALYZE TRENDS SUCH AS CHANGES IN VOLUME FOR REPORTED ARRESTS AND DISPOSITIONS BY REPORTING AGENCIES AND THE AMOUNT OF ELAPSED TIME BETWEEN ARRESTS AND DISPOSITIONS; AND 3) IMPROVING THE ABILITY TO CREATE STAKEHOLDER REPORTS FOR CONTRIBUTING AGENCIES, FUNDING ENTITIES, MEDIA AND THE PUBLIC.

TO SUPPORT THIS WORK, SEARCH DEVELOPED A COMMON DATA MODEL (CDM) THAT ALLOWS CCH DATA FROM MULTIPLE STATES TO BE MAPPED INTO A SINGLE, UNIFORM REPRESENTATION OF DATA. THERE ARE SEVERAL ADVANTAGES TO THE CDM APPROACH. FIRST, BY CREATING THE CDM, SEARCH IS ABLE TO CREATE DATABASES THAT HAVE SEMANTICALLY EQUIVALENT ENUMERATIONS OF THE DATA FROM EACH STATE, WHICH MAKES IT POSSIBLE TO MEASURE DATA QUALITY IN THE SAME WAY ACROSS STATES. ADDITIONALLY, SINCE THE UNDERLYING DATABASE FOR EACH STATE HAS AN IDENTICAL STRUCTURE ONCE MAPPED INTO THE CDM, SEARCH CAN CREATE THE SAME "FRONT-END" USER INTERFACES FOR CCH MONITORING TOOLS (E.G., DASHBOARDS AND INTERACTIVE BUSINESS INTELLIGENCE PLATFORMS) WITH VERY LITTLE EFFORT. THIS WILL MAKE IT EASIER FOR MORE STATES TO TAKE ADVANTAGE OF THE CCH METRICS PRODUCTS BEING DEVELOPED BY SEARCH.

SEARCH CREATED PROTOTYPE DASHBOARDS THAT COULD BE USED BY CRIMINAL HISTORY REPOSITORY MANAGERS. THE GOAL IS TO PROVIDE END USERS WITH SIMPLE TOOLS THAT CAN BE USED TO: 1) MONITOR OPERATIONAL METRICS WITHIN THE CRIMINAL HISTORY REPOSITORY, 2) RESPOND TO STATISTICAL INQUIRIES FROM LEGISLATORS, THE MEDIA, AND THE PUBLIC WITHOUT THE NEED FOR PROGRAMMING RESOURCES AT THE STATE AGENCY; AND 3) RESPOND TO PORTIONS

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OF THE BIENNIAL SURVEY OF STATE CRIMINAL HISTORY INFORMATION SYSTEMS.

SEARCH CONTINUES TO EXPAND THE NUMBER OF STATES PARTICIPATING IN ITS CCH DATA ANALYTICS WORK, AND SEARCH HAS OBTAINED DATA FROM ARKANSAS, MAINE, NEW JERSEY, AND TENNESSEE. THE DATASETS ARE BEING USED TO IDENTIFY KEY INFORMATION AVAILABLE FROM THE STATES THAT CASE BE USED TO IDENTIFY AND ASSESS AREAS THAT CAN IMPROVED EITHER THROUGH CHANGES TO EXISTING POLICIES, PROCESSES, OR A COMBINATION OF BOTH TO MAKE MORE ACCURATE, TIMELY AND COMPLETE DATA AVAILABLE FOR CRIMINAL AND NONCRIMINAL JUSTICE PURPOSES SUCH AS EMPLOYMENT, LICENSING, AND FIREARMS BACKGROUND CHECKS. DURING THE REPORTING PERIOD, MICHIGAN AND WASHINGTON STATE COMMITTED TO PROVIDING DATA THAT SEARCH WILL USE TO CREATE PROTOTYPE DASHBOARDS TO ASSIST IN MEASURING DATA QUALITY AND OVERALL CRIMINAL HISTORY OPERATIONS.

FBI DECEASED PERSONS IDENTIFICATION SERVICE BEST PRACTICES FOCUS GROUP

AS BACKGROUND, THE BIOMETRIC SERVICES SECTION AT FBI CJIS HAS REBRANDED ITS COLD CASE/UNKNOWN DECEASED IDENTIFICATION SERVICE. THE DECEASED PERSONS IDENTIFICATION (DPI) SERVICE IS THE RESULT OF THIS EFFORT, PROVIDING A MORE ROBUST SEARCH OF THE NEXT GENERATION IDENTIFICATION SYSTEM (NGI) AND OTHER DATA REPOSITORIES TO ALL FINGERPRINT CONTRIBUTORS WHO REQUEST IDENTIFICATION OF DECEASED PERSONS/HUMAN REMAINS IN ACTIVE AND COLD CASES. DURING THE REPORTING PERIOD, SEARCH CONTINUED ITS WORK WITH THE DPI FOCUS GROUP WHICH WAS FORMED AFTER RECOGNIZING THAT THERE ARE VARYING METHODS BY WHICH LAW ENFORCEMENT OFFICIALS, MEDICAL EXAMINERS, CORONERS, AND OTHERS SUBMIT INFORMATION TO THE FBI WHICH LIMIT THEIR ABILITY TO IDENTIFY DECEASED INDIVIDUALS

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IN A TIMELY MANNER OR AT ALL.

THE FOCUS GROUP, WHICH INCLUDES SEARCH, IS COMPRISED OF FEDERAL, STATE, LOCAL, AND TRIBAL LAW ENFORCEMENT REPRESENTATIVES, MEDICAL EXAMINERS, CORONERS, AND REPRESENTATIVES OF CRIMINAL HISTORY INFORMATION CLEARINGHOUSES. ITS MISSION IS TO ESTABLISH BEST PRACTICES AND TO PROMOTE INFORMATION SHARING ACROSS DECEASED IDENTIFICATION STAKEHOLDERS THROUGHOUT THE UNITED STATES TO HELP TO MAKE A CONSISTENT METHOD FOR REPORTING INFORMATION ABOUT DECEDENTS. THE FOCUS GROUP ALSO SEEKS TO PROVIDE EDUCATION AND OUTREACH ON THE BEST WAYS TO EFFICIENTLY IDENTIFY DECEASED PERSONS/HUMAN REMAINS. EXAMPLES OF WORK OR ISSUES THE FOCUS GROUP IS WORKING ON ARE AS FOLLOWS:

- IDENTIFYING AND DOCUMENTING INFORMATION GAPS
- DEVELOPING STRATEGIES TO STREAMLINE AND STANDARDIZE DECEASED PERSON IDENTIFICATION REQUESTS -MAKING RECOMMENDATIONS TO REDUCE THE LENGTH OF TIME TO PROCESS DECEASED PERSON AND COLD CASE REQUESTS
- ESTABLISHING A "QUICK REFERENCE GUIDE" FOR OBTAINING AND SUBMITTING LEGIBLE FINGERPRINTS FROM DECEASED INDIVIDUALS
- IDENTIFYING BEST PRACTICES REGARDING HOW CRIMINAL HISTORY REPOSITORIES SHOULD BE NOTIFIED ONCE THE IDENTITIES OF DECEASED PERSONS ARE ESTABLISHED SO THIS INFORMATION CAN BE INCLUDED IN AND ACCESSED BY CCH REPOSITORIES MAINTAINED BY THE STATES

FORM 990, PART VI, SECTION A, LINE 6:

THE MEMBERS CONSIST OF ONE REPRESENTATIVE OF EACH STATE, THE DISTRICT OF COLUMBIA, THE COMMONWEALTH OF PUERTO RICO AND THE U.S. VIRGIN ISLANDS, AND EIGHT INDIVIDUALS APPOINTED BY THE CHAIRPERSON, KNOWN AS AT-LARGE MEMBERS.

FORM 990, PART VI, SECTION A, LINE 7A:

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MEMBERS EACH GET ONE VOTE AND ELECT THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION A, LINE 8B:

NO COMMITTEES HAVE THE AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY.

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

THE FILING OF THE FORM 990 IS OPERATIONAL SO IT IS REVIEWED BY THE DIRECTOR OF OPERATIONS AND THE EXECUTIVE DIRECTOR, NOT BY THE ORGANIZATION'S GOVERNING BODY.

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

UPON REQUEST AND ALSO AVAILABLE ON GUIDESTAR.ORG, A WEBSITE FOR CHARITY VERIFICATION

FORM 990, PART IX, LINE 11G, OTHER FEES:

CONSULTANT &amp; CONTRACT SERVICES:

PROGRAM SERVICE EXPENSES	587,517.
MANAGEMENT AND GENERAL EXPENSES	85,761.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	673,278.

PAYROLL PROCESSING FEE:

PROGRAM SERVICE EXPENSES	29,522.
MANAGEMENT AND GENERAL EXPENSES	4,309.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	33,831.

TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	707,109.
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FORM 990, PART XII, LINE 2C

THE ORGANIZATION'S PROCESSES FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT HAVE NOT CHANGED FROM THE PREVIOUS YEAR.