## Form **990**

(Rev. January 2020)

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

OMB No. 1545-0047 2019

Dep	artment	t of the Treasury venue Service	► Do not er ► Go to www	ter social security numbers on the irs.gov/Form990 for instruction	s form as it may be mad	le public. formation.		Open to Public Inspection	
A For the 2019 calendar year, or tax year beginning , 2019, and ending ,								,	
В	Check	ck if applicable: C D Employer identification							
	A	Address change JORDAN'S GUARDIAN ANGELS				90-1022228			
	N	lame change	1121 L STREET #1			E Telephone number			
	Initial return SACRAMENTO, CA 95814					(916)		41-6222	
	Fi	Final return/terminated							
	А	mended return	rn				<b>G</b> Gross receipts \$ 762, 92		
	A	pplication pending	F Name and address of principal officer: JOSEPH LANG			(a) Is this a group return for subordinates? Yes X No			
			SAME AS C ABOVE	OODDI'II DIINO	H(b) Are all subordinates	Are all subordinates included?  If "No," attach a list. (see instructions)  Yes  No			
I Tax-exempt status: X 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) or 527								structions) — —	
J									
K Form of organization: X Corporation								legal domicile: CA	
Part I Summary									
	1 Briefly describe the organization's mission or most significant activities: JORDAN'S GUARDIAN ANGELS CHARITABLE							CHARITABLE	
ā		PURPOSES	POSES ARE TO ENGAGE IN CHARITABLE GIVING FOR THE BENEFIT OF NEEDY CHILDREN AND						
anc	FAMILIES AND TO PROVIDE SUPPORT FOR MEDICAL RESEARCH.								
ern		5-75FF							
Š	2	Check this bo	ox   If the organization	n discontinued its operation	s or disposed of mor	re than 25% of its	net as		
৽৵	3	Number of in	oung members of the government	rning body (Part VI, line 1a) s of the governing body (Par	t VI line 1h)		4	<u>5</u>	
es	5			n calendar year 2019 (Part V			5	5	
Activities & Governance	6	Total number	r of volunteers (estimate if	necessary)			6	0	
		Total unrelate	ed business revenue from I	Part VIII, column (C), line 12	2		7a	0.	
	b	Net unrelated	d business taxable income	from Form 990-T, line 39			7b	0.	
Revenue		_				Prior Year		Current Year	
	8		ontributions and grants (Part VIII, line 1h).				81.	762,923.	
	9		gram service revenue (Part VIII, line 2g)						
	10		stment income (Part VIII, column (A), lines 3, 4, and 7d)rrevenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)					-174,912.	
late.	11 12		otal revenue (Part VIII, Column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)otal revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)						
-	13		similar amounts paid (Part IX, column (A), lines 1-3)		1,559,418.		588,011.		
ses	14		nefits paid to or for members (Part IX, column (A), line 4)						
	15		plaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)						
		a Professional fundraising fees (Part IX, column (A), line 11e)							
Expenses							ER uintase		
Exp	1		Total fundraising expenses (Part IX, column (D), line 25) ►						
_			otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25).					1,062,605.	
	0.000.000		1,588,326.		1,062,605. -474,594.				
	19 Revenue less expenses. Subtract line 18 from line 12						-28,908.		
Net Assets or Fund Balances	20	Total assets	otal assets (Part X, line 16)				Beginning of Current Year 1, 412, 021.		
	21		al liabilities (Part X, line 26)					1,472,912.	
let A	21						391,904. 700,00 1,020,117. 772,91		
_	22 ort II	TO THE DESIGNATION OF THE PROPERTY OF THE PROP					17.	772,912.	
		3							
com	er pena plete. D	ilties of perjury, I di Declaration of prepa	eclare that I have examined this retu arer (other than officer) is based on	ırn, including accompanying schedule all information of which preparer has	s and statements, and to th any knowledge.	ne best of my knowledge	and beli	ief, it is true, correct, and	
Sic	nr	Signatu	Signature of officer						
Sign Here		JOS	JOSEPH LANG  PRESIDE						
		JOSEPH LANG     Type or print name and title							
0		Print/Type p	preparer's name	Preparer's signature	Date	Check	if	PTIN	
Paid Preparer Use Only		OSCAR	URIBE, CPA	OSCAR URIBE, CPA	and the second	self-employe	_	P02251249	
			Firm's address 1515 RIVER PARK DR STE 150				Firm's EIN ► 94-2769017		
			SACRAMENTO, CA 95815-4606				Phone no. (916) 481-2856		
May the IRS discuss this return with the preparer shown above? (see instructions)									
BAA For Paperwork Reduction Act Notice, see the separate instructions.  TEEA0101L 01/21/20  Form 990 (2019)									
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