

Form

CT-12For Oregon Charities.
For Accounting Periods Beginning in:**2021****Charitable Activities Section
Oregon Department of Justice**100 SW Market Street
Portland, OR 97201-5702
Email: charitable@doj.state.or.us
Website: https://www.doj.state.or.usVOICE (971) 673-1880
TTY (800) 735-2900
FAX (971) 673-1882**Line-by-line instructions for completing the annual
report form can be found on our website.****You can now file reports and
pay by credit card using our
online form at
[https://justice.oregon.gov/
paymentportal/Account/Login](https://justice.oregon.gov/paymentportal/Account/Login)****Section I. General Information**1. **Registration #:** 60454**Grassroots Connect**1430 Willamette St # 136
Eugene OR 97401**Phone:** (541) 327-9838
Period Beginning: 1/1/2021**Fax:**
Period Ending: 12/31/2021**Cross Through Incorrect Items and Correct Here:**
(See instructions for change of name or accounting period.)**Registration #:****Organization Name:****Address:****City, State, Zip:****Phone:****Email:****Period Beginning:** / /**Fax:****Period Ending:** / /**RECEIVED****MAY 16 2022****DEPARTMENT OF JUSTICE
PORTLAND LEGAL****Amended
Report?**☐

2. Did a certified public accountant audit your financial records? - If yes, attach a copy of the auditor's report, financial statements, accompanying notes, schedules, or other documents supplementing the report or financial statements. ☐ Yes ☒ No
3. Is the organization a party to a contract with a fundraising firm that relates to solicitations in Oregon? If yes, check the type of solicitations; ☐ in-person; ☐ direct mail; ☐ advertising; ☐ vending machine; ☐ telephone; or ☐ other solicitations. If yes, also write the name of the fundraising firm(s) here: _____ (If you checked "other solicitations", attach an explanation.) ☐ Yes ☒ No
4. Has the organization or any of its officers, directors, trustees, or key employees ever signed a voluntary agreement with any government agency or been a party to legal action in any court or administrative agency regarding charitable solicitation, administration, management, or fiduciary practices? If yes, attach explanation of each such agreement or action. See instructions. ☐ Yes ☒ No
5. During this reporting period, did the organization amend its articles of incorporation, bylaws, or trust documents, OR did the organization receive a determination or revocation letter from the Internal Revenue Service relating to its tax-exempt status? If yes, attach a copy of the amended document or letter. ☒ Yes ☐ No
6. Is the organization ceasing operations and is this the final report? (If yes, see instructions on how to close your registration.) ☐ Yes ☒ No
7. Provide contact information for the person responsible for retaining the organization's records.

Name	Position	Phone	Mailing Address & Email Address
Michelle Hsu	Secretary	54-708-3689	1430 Willamette St. #136 Eugene, OR 97401

8. List of Officers, Directors, Trustees and Key Employees - List each person who held one of these positions at any time during the year even if they did not receive compensation. Attach additional sheets if necessary. If an attached IRS form includes substantially the same compensation information, the phrase "See IRS Form" may be entered in lieu of completing this section. (Oregon law requires a minimum of three directors for nonprofit public benefit corporations.)

(A) Name, mailing address, daytime phone number and email address		(B) Title & average weekly hours devoted to position	(C) Compensation (enter \$0 if position unpaid)
Name:	Elizabeth Brown	President	0
Address:	1430 Willamette St. #136 Eugene, OR	5 hrs	
Phone:	(541) 327-9838 Email: contact@grassrootsconnect.org		
Name:	Michelle Hsu	Secretary	0
Address:	1430 Willamette St. #136 Eugene, OR 97401	2 hrs	
Phone:	(541) 708-3689 Email: contact@grassrootsconnect.org		
Name:	Candice King	Treasurer	0
Address:	1430 Willamette St. #136 Eugene, OR 97401	2 hrs	
Phone:	(541) 228-9680 Email: contact@grassrootsconnect.org		

Form Continued on Reverse Side

Section II. Fee Calculation

<p>9. Total Revenue <small>(From Part I, Line 12 (current year) on Form 990; Line 9 on Form 990-EZ; Part I, Line 12a on Form 990-PF; or see the CT-12 instructions for how to calculate total revenue. Attach explanation if Total Revenue is \$0.)</small></p>	9.	0																	
<p>10. Revenue Fee <small>(See chart below. Minimum fee is \$20, even if total revenue is \$0 or a negative amount.)</small></p> <table border="1" style="width: 100%; border-collapse: collapse; font-size: small;"> <thead> <tr> <th style="text-align: left;">Amount on Line 9</th> <th style="text-align: left;">Revenue Fee</th> </tr> </thead> <tbody> <tr><td>\$0 - \$24,999</td><td>\$20</td></tr> <tr><td>\$25,000 - \$49,999</td><td>\$50</td></tr> <tr><td>\$50,000 - \$99,999</td><td>\$90</td></tr> <tr><td>\$100,000 - \$249,999</td><td>\$150</td></tr> <tr><td>\$250,000 - \$499,999</td><td>\$200</td></tr> <tr><td>\$500,000 - \$999,999</td><td>\$300</td></tr> <tr><td>\$1,000,000 or more</td><td>\$400</td></tr> </tbody> </table>	Amount on Line 9	Revenue Fee	\$0 - \$24,999	\$20	\$25,000 - \$49,999	\$50	\$50,000 - \$99,999	\$90	\$100,000 - \$249,999	\$150	\$250,000 - \$499,999	\$200	\$500,000 - \$999,999	\$300	\$1,000,000 or more	\$400	10.	20.00	
Amount on Line 9	Revenue Fee																		
\$0 - \$24,999	\$20																		
\$25,000 - \$49,999	\$50																		
\$50,000 - \$99,999	\$90																		
\$100,000 - \$249,999	\$150																		
\$250,000 - \$499,999	\$200																		
\$500,000 - \$999,999	\$300																		
\$1,000,000 or more	\$400																		
<p>11. Net Assets or Fund Balances at End of the Reporting Period <small>(From Part I, Line 22 (end of year) on Form 990; Line 21 on Form 990-EZ; or Part III, Line 6 on Form 990-PF; or see the CT-12 instructions to calculate. Attach explanation if amount is \$0 or a negative number)</small></p>	11.	-683																	
<p>12. Net Fixed Assets Used to Conduct Charitable Activities <small>(Generally, from Part X, Line 10c on Form 990; Line 23B and possibly 24B on Form 990-EZ; or Part II, Line 14b on Form 990-PF; or see the CT-12 instructions to calculate. See the CT-12 instructions if organization owns income-producing assets.)</small></p>	12.	0																	
<p>13. Amount Subject to Net Assets or Fund Balances Fee <small>(Line 11 minus Line 12. If Line 11 minus Line 12 is less than \$50,000, write \$0.)</small></p>	13.	-683																	
<p>14. Net Assets or Fund Balances Fee <small>(Line 13 multiplied by .0001. If the fee is less than \$5, enter \$0. Not to exceed \$2,000. Round cents to the nearest whole dollar.)</small></p>	14.	0																	
<p>15. Are you filing this report late? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <small>(If yes, the late fee is a minimum of \$20. You may owe more depending on how late the report is. See Instruction 15 for additional information or contact the Charitable Activities Section at (971) 673-1880 to obtain late fee amount.)</small></p>	15.																		
<p>16. Total Amount Due <small>(Add Lines 10, 14, and 15. Make check payable to the Oregon Department of Justice.)</small></p>	16.	20																	
<p>17. Attach a copy of the organization's federal 990 or other return and all supporting schedules and attachments that were filed with the IRS, except that Form 990 & 990EZ filers do not need to attach a copy of their Schedule B. Also, if the organization did not file with the IRS or filed a 990-N, but had Total Revenue of \$50,000 or more, or Net Assets or Fund Balances of \$100,000 or more, see the instructions. Such organizations may be required to complete certain IRS forms for Oregon purposes only. If the attached return was not filed with the IRS, then mark any such return as "For Oregon Purposes Only." If your organization files IRS Form 990-N (e-Postcard) please attach a copy if available.</p>																			

<p>Please Sign Here</p>	<p>Under penalties of perjury, I declare that I am an officer/director of the organization. I have examined this return, including all accompanying forms, schedules, and attachments, and to the best of my knowledge and belief, it is true, correct, and complete.</p> <p>⇒ <u><i>Elizabeth Brown</i></u> <small>Signature of officer</small></p> <p><u>Elizabeth Brown</u> <small>Officer's name (printed)</small></p>	<p><u>3/11/22</u> <small>Date</small></p> <p><u>President</u> <small>Title</small></p>
<p>Paid Preparer's Use Only</p>	<p>⇒ _____ <small>Preparer's signature</small></p> <p>_____ <small>Date</small></p> <p>_____ <small>Preparer's name (printed)</small></p>	<p><u>1430 Willamette St, #136</u> <small>Address</small></p> <p><u>541-327-9838</u> <u>Eugene, OR 97401</u> <small>Phone</small></p>

Line-by-line instructions for completing the annual report form can be found at <https://www.doj.state.or.us/charitable-activities/annual-reporting-for-charities/file-your-annual-report>. If you click the appropriate link for this year's form, the instructions are included in that document. If you would like us to send a copy of the instructions, please call us at 971-673-1880 or send an email to charitable@doj.state.or.us.

8. Additional Key Official

(A) Zachary L. Stark
1430 Willamette Street #136
Eugene, OR 97401-4049
541-972-3354

(B) Director; average of 2 hours per week devoted to position

(C) \$0 compensation

9. Total revenue is zero because the organization received tax-exempt status at the end of 2021, and its first donation was deposited in 2022. The organization plans to continue operations.

11. Net assets are negative due to accrued expenses related to the formation of the organization.

Form 990-N

Electronic Notice (e-Postcard)

OMB No. 1545-2085

Department of the Treasury
Internal Revenue Service

for Tax-Exempt Organization not Required to File Form 990 or 990-EZ

2021

Open to Public Inspection

A For the 2021 Calendar year, or tax year beginning 2021-01-01 and ending 2021-12-31

B Check if available

☐ Terminated for Business

☒ Gross receipts are normally \$50,000 or less

C Name of Organization: GRASSROOTS CONNECT

1430 Willamette Street 138,
Eugene, OR, US, 97401

D Employee Identification

Number 87-1766092

E Website:

F Name of Principal Officer: Elizabeth Brown

1430 Willamette Street 138,
Eugene, OR, US, 97401

Privacy Act and Paperwork Reduction Act Notice We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws.

The organization is not required to provide information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. The rules governing the confidentiality of the Form 990-N is covered in code section 6104.

The time needed to complete and file this form and related schedules will vary depending on the individual circumstances. The estimated average times is 15 minutes.

Note: This image is provided for your records only. Do Not mail this page to the IRS. The IRS will not accept this filing via paper. You must file your Form 990-N (e-Postcard) electronically.

RECEIVED
MAY 16 2022
DEPARTMENT OF JUSTICE
PORTLAND LEGAL