

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

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

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

OMB No. 1545-0047

2020Open to Public
Inspection**A** For the 2020 calendar year, or tax year beginning

and ending

B Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization

AVIVO

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

1900 CHICAGO AVENUE SOUTH

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

MINNEAPOLIS, MN 55404

F Name and address of principal officer: KELLY MATTER

SAME AS C ABOVE

D Employer identification number

41-0828779

E Telephone number

612-752-8000

G Gross receipts \$ 35,819,794.**H(a)** Is this a group returnfor subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. See instructions

H(c) Group exemption number ▶**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ [HTTPS://AVIVOMN.ORG](https://avivomn.org)**K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: 1956**M** State of legal domicile: MN**Part I Summary**

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: AVIVO INCREASES WELL-BEING THROUGH RECOVERY AND CAREER ADVANCEMENT WHILE WORKING TO END		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	16
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	16
	5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5	497
	6	Total number of volunteers (estimate if necessary)	6	611
		7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a
7b		Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	17,977,405.	24,171,447.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	10,816,552.	11,642,379.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-80,107.	-69,006.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	13,058.	2,542.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	28,726,908.	35,747,362.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	4,056,582.	5,943,980.
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	18,424,819.	18,811,582.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 478,941.	0.	0.
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	6,217,501.	6,526,147.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	28,698,902.	31,281,709.
	19	Revenue less expenses. Subtract line 18 from line 12	28,006.	4,465,653.
	Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year
21		Total liabilities (Part X, line 26)	13,044,745.	29,856,281.
22		Net assets or fund balances. Subtract line 21 from line 20	9,166,163.	21,512,046.

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.

Sign Here	Signature of officer	Date		
	KELLY MATTER, PRESIDENT/CEO	05/13/2021		
Paid	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/> PTIN
	DANIEL PERSAUD	DANIEL PERSAUD	05/13/21	P00294068
Preparer Use Only	Firm's name ▶ CLIFTONLARSONALLEN LLP	Firm's EIN ▶ 41-0746749		
	Firm's address ▶ 220 S 6TH STREET, SUITE 300 MINNEAPOLIS, MN 55402	Phone no. 612-376-4500		

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

☒**1** Briefly describe the organization's mission:

AVIVO INCREASES WELL-BEING THROUGH RECOVERY AND CAREER ADVANCEMENT
WHILE WORKING TO END HOMELESSNESS.

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 ☐ No

If "Yes," describe these new services on Schedule O.

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

If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses \$ 19,879,815. Including grants of \$ 4,945,592.) (Revenue \$ 11,642,379.)
INTEGRATED CHEMICAL & MENTAL HEALTH SERVICES-

AVIVO'S CHEMICAL AND MENTAL HEALTH TEAM PROVIDES INTEGRATED OUTPATIENT
AND RESIDENTIAL SUBSTANCE USE AND MENTAL HEALTH TREATMENT. MANY OF THE
INDIVIDUALS WE SERVE ARE EXPERIENCING HOMELESSNESS AND/OR ARE LIVING IN
POVERTY. WE SPECIALIZE IN CLINICAL TREATMENT, RECOVERY MAINTENANCE,
AND SUPPORTIVE SERVICES FOR MEN AND WOMEN, AS WELL AS FAMILY SERVICES
FOR THE CHILDREN OF PARTICIPANTS. ADDITIONALLY, AVIVO PROVIDES
COMMUNITY-BASED CHEMICAL AND MENTAL HEALTH AND HOUSING SUPPORT TO
SUPPORT RECOVERY AND WORK TO END HOMELESSNESS. IN 2020 AVIVO SERVED
ALMOST 4,000 PEOPLE AND SUPPORTED OVER 900 CONNECT TO PERMANENT
HOUSING.

4b (Code:) (Expenses \$ 5,147,821. Including grants of \$ 329,811.) (Revenue \$ 0.)
EMPLOYMENT SERVICES-

AVIVO'S EMPLOYMENT SERVICES INCLUDE A COMPREHENSIVE ARRAY OF ASSISTANCE
DESIGNED TO PREPARE PEOPLE FOR AND CONNECT PEOPLE TO EMPLOYMENT AND
CAREERS. WE SPECIALIZE IN SERVING INDIVIDUALS MOVING OFF PUBLIC
ASSISTANCE (MFIP), AT-RISK YOUTH AGES 14-24, DISLOCATED WORKERS,
INDIVIDUALS WITH DISABILITIES, IMMIGRANTS AND REFUGEES, AND OTHER
UNEMPLOYED OR UNDER-EMPLOYED MINNESOTANS. IN 2020 WE SUPPORTED 8,354
INDIVIDUALS IN THE METRO AND GREATER MINNESOTA AND PLACED 1,494 INTO
EMPLOYMENT WITH 84% RETAINING EMPLOYMENT AT SIX MONTHS.

4c (Code:) (Expenses \$ 2,946,760. Including grants of \$ 668,576.) (Revenue \$ 0.)
CAREER EDUCATION-

CAREER TRAINING AND SUPPORT SERVICES TO ASSIST INDIVIDUALS WITH
BARRIERS TO EMPLOYMENT INCLUDING IMMIGRANTS AND REFUGEES, INDIVIDUALS
WITH DISABILITIES, DISLOCATED WORKERS, INDIVIDUALS IN RECOVERY AND
UNEMPLOYED AND UNDEREMPLOYED MINNESOTANS DISCOVER CAPABILITIES THROUGH
A BROAD RANGE OF ASSESSMENT AND SHORT-TERM, CONTEXTUALIZED,
CREDENTIALLED, INDUSTRY APPROVED POST-SECONDARY CAREER-BASED TRAINING.
AVIVO IS LICENSED AS A POST-SECONDARY SCHOOL THROUGH THE MINNESOTA
OFFICE OF HIGHER EDUCATION AND IS ACCREDITED BY CARF. STUDENTS EARN
CREDENTIALS THAT ARE RECOGNIZED BY INDUSTRY AND CREDITS THAT CAN
TRANSFER TO ACCREDITED 2- AND 4-YEAR COLLEGES.

4d Other program services (Describe on Schedule O.)

(Expenses \$ Including grants of \$) (Revenue \$)

4e Total program service expenses 27,974,396.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4 X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b	X
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c	X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a	X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	12b X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	X

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	X	
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		X
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		X
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		X
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV		X
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		X
c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	X	
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	259	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		

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

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2a	497		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country		
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7 Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			
		8	
9 Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10 Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11 Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state?	13a	
Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15	X
If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	X
If "Yes," complete Form 4720, Schedule O.			

Form 990 (2020)

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
1a Enter the number of voting members of the governing body at the end of the tax year 1a 16		
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.		
b Enter the number of voting members included on line 1a, above, who are independent 1b 16		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3	X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5	X
6 Did the organization have members or stockholders?	6	X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	8a X	
b Each committee with authority to act on behalf of the governing body?	8b X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9	X

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **MN**

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 **Kelly Matter - 612-752-8000**
 1900 CHICAGO AVENUE SOUTH, MINNEAPOLIS, MN 55404

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) 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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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) KELLY MATTER PRESIDENT AND CEO	40.00 1.00			X				234,250.	0.	2,240.
(2) DARCY FLINN CFO/COO	40.00 1.00			X				204,722.	0.	25,836.
(3) BRUCE WENGER VP EXTERNAL RELATIONS	40.00 1.00			X				170,127.	0.	1,508.
(4) EMILY BASTIAN VP OF ENDING HOMELESSNESS	40.00 1.00			X				146,813.	0.	3,601.
(5) METTE MCLOUGHLIN DIRECTOR OF HUMAN RESOURCE	40.00 1.00			X				109,141.	0.	16,010.
(6) JILL BUTLER CHAIR	2.00	X		X				0.	0.	0.
(7) CHARLES ABRAHAMSON VICE CHAIR	2.00	X		X				0.	0.	0.
(8) PAUL WAY PAST CHAIR/VICE CHAIR	2.00	X		X				0.	0.	0.
(9) DAN JAEGER EXTERNAL RELATIONS CHAIR	2.00	X		X				0.	0.	0.
(10) CHRISTOPHER TOPPIN TREASURER	2.00	X		X				0.	0.	0.
(11) DR. THOMAS KEUL SECRETARY	2.00	X		X				0.	0.	0.
(12) CARLTON AMMONS DIRECTOR	2.00	X						0.	0.	0.
(13) JASON BEUMER DIRECTOR	2.00	X						0.	0.	0.
(14) DR. NICOLE COOPER DIRECTOR	2.00	X						0.	0.	0.
(15) EMILY HEBERT DIRECTOR	2.00	X						0.	0.	0.
(16) JOSHUA KRSNAK DIRECTOR	2.00	X						0.	0.	0.
(17) LAVELLE NEAL DIRECTOR	2.00	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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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) KATHRYN SCHOENROCK DIRECTOR	2.00	X						0.	0.	0.
(19) MARK SKUBIC DIRECTOR	2.00	X						0.	0.	0.
(20) CHAD UNDERWOOD DIRECTOR	2.00	X						0.	0.	0.
(21) BRIAN VAN ABEL DIRECTOR	2.00	X						0.	0.	0.
1b Subtotal								865,053.	0.	49,195.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								865,053.	0.	49,195.

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 **7**

- 3** Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual **3**
- 4** 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? If "Yes," complete Schedule J for such individual **4**
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person **5**

	Yes	No
3		X
4	X	
5		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
CKC GOOD FOOD PO BOX 431419, MINNEAPOLIS, MN 55443	FOOD SERVICE PROVIDERS	472,619.
KLH, 130 CHESHIRE LANE, SUITE 125, MINNETONKA, MN 55305	TECHNOLOGY SUPPORT SERVICES	394,134.
MARCO TECHNOLOGIES LLC NW7128, PO BOX 1450, MINNEAPOLIS, MN 55485	TECHNOLOGY SUPPORT SERVICES	389,832.
AMERICAN SECURITY, LLC MI 93 PO BOX 1150, MINNEAPOLIS, MN 55480	SECURITY SERVICES	222,604.
HARDWARE TECHNOLOGY COMPANY, LLC, 10900 73RD AVE N SUITE 145, MAPLE GROVE, MN	TECHNOLOGY SUPPORT SERVICES	219,889.
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 5		

Form **990** (2020)

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a	329,000.				
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	17,892,517.				
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	5,949,930.				
	g Noncash contributions included in lines 1a-1f	1g	\$				
	h Total. Add lines 1a-1f			24,171,447.			
Program Service Revenue	2 a PROGRAM SERVICE FEES	Business Code	624100	11,597,055.	11,597,055.		
	b RENTAL INCOME - PROGRA		624100	45,324.	45,324.		
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			11,642,379.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			3,426.			3,426.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	(ii) Personal				
	b Less: rental expenses ...						
	c Rental income or (loss)						
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses			72,432.			
	c Gain or (loss)			-72,432.			
	d Net gain or (loss)			-72,432.			-72,432.
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18						
	b Less: direct expenses						
	c Net income or (loss) from fundraising events						
	9 a Gross income from gaming activities. See Part IV, line 19						
b Less: direct expenses							
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances							
b Less: cost of goods sold							
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a MISCELLANEOUS REVENUE	Business Code	900099	2,542.			2,542.
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d			2,542.			
12 Total revenue. See instructions				35,747,362.	11,642,379.	0.	-66,464.

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 ☐

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
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	5,943,980.	5,943,980.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	914,247.	731,397.	182,850.	
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	14,889,409.	13,140,008.	1,461,048.	288,353.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	87,195.	78,352.	7,821.	1,022.
9 Other employee benefits	1,487,722.	1,330,855.	140,142.	16,725.
10 Payroll taxes	1,433,009.	1,260,440.	145,558.	27,011.
11 Fees for services (nonemployees):				
a Management				
b Legal	13,250.		13,250.	
c Accounting	51,036.		51,036.	
d Lobbying	43,000.		43,000.	
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	696,532.	508,891.	142,422.	45,219.
12 Advertising and promotion	18,517.		18,517.	
13 Office expenses	995,932.	817,436.	160,454.	18,042.
14 Information technology				
15 Royalties				
16 Occupancy	2,733,138.	2,561,245.	148,126.	23,767.
17 Travel	111,152.	110,366.	760.	26.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	115,613.	56,736.	20,081.	38,796.
20 Interest	179,568.	165,878.	11,709.	1,981.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	571,534.	499,212.	66,496.	5,826.
23 Insurance	122,885.	78,050.	43,553.	1,282.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a EQUIPMENT PURCHASES REN	446,318.	382,142.	61,196.	2,980.
b BAD DEBT	265,147.	265,147.		
c MEMBERSHIPS	96,841.	20,500.	76,231.	110.
d OTHER EXPENSES	65,684.	23,761.	34,122.	7,801.
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	31,281,709.	27,974,396.	2,828,372.	478,941.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	1,313,524.	2	6,756,559.
	3 Pledges and grants receivable, net	507,000.	3	166,744.
	4 Accounts receivable, net	2,985,868.	4	4,199,555.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	483,794.	9	928,196.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 26,044,844.		
	b Less: accumulated depreciation	10b 8,312,808.	10c	17,732,036.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	251,983.	15	73,191.
16 Total assets. Add lines 1 through 15 (must equal line 33)	13,044,745.	16	29,856,281.	
Liabilities	17 Accounts payable and accrued expenses	1,912,577.	17	3,502,305.
	18 Grants payable		18	
	19 Deferred revenue	51,152.	19	254,979.
	20 Tax-exempt bond liabilities	5,044,022.	20	4,653,782.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	0.	23	8,564,101.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	2,158,412.	25	4,536,879.
	26 Total liabilities. Add lines 17 through 25	9,166,163.	26	21,512,046.
	Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.		
27 Net assets without donor restrictions		3,280,509.	27	6,368,765.
28 Net assets with donor restrictions		598,073.	28	1,975,470.
Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.				
29 Capital stock or trust principal, or current funds			29	
30 Paid-in or capital surplus, or land, building, or equipment fund			30	
31 Retained earnings, endowment, accumulated income, or other funds			31	
32 Total net assets or fund balances		3,878,582.	32	8,344,235.
33 Total liabilities and net assets/fund balances		13,044,745.	33	29,856,281.

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Part XI Reconciliation of Net AssetsCheck 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	35,747,362.
2	Total expenses (must equal Part IX, column (A), line 25)	2	31,281,709.
3	Revenue less expenses. Subtract line 2 from line 1	3	4,465,653.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3,878,582.
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	8,344,235.

Part XII Financial Statements and ReportingCheck 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 in 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** (2020)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public
Inspection

Name of the organization

AVIVO

Employer identification number

41-0828779

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations _____

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see Instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	18,296,270.	17,306,804.	17,336,825.	17,977,405.	24,171,447.	95,088,751.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	18,296,270.	17,306,804.	17,336,825.	17,977,405.	24,171,447.	95,088,751.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						95,088,751.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4	18,296,270.	17,306,804.	17,336,825.	17,977,405.	24,171,447.	95,088,751.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	91.	167.	2.		3,426.	3,686.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	23,391.	25,942.	12,831.	13,058.	2,542.	77,764.
11 Total support. Add lines 7 through 10						95,170,201.
12 Gross receipts from related activities, etc. (see instructions)					12	53,488,383.
13 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

14 Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f))	14	99.91 %
15 Public support percentage from 2019 Schedule A, Part II, line 14	15	99.87 %
16a 33 1/3% support test - 2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		
		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2019. 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 stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		
		<input type="checkbox"/>
18 Private foundation. 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"/>

Schedule A (Form 990 or 990-EZ) 2020

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) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 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

15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2019 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2019 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2020. 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 - 2019. 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
1 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>		
2 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>		
3a 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 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>		
c 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>		
4a 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 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>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <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>		
5a 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 Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
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)

- 11** Has the organization accepted a gift or contribution from any of the following persons?
- a** A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?
- b** A family member of a person described in line 11a above?
- c** A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in **Part VI**.

	Yes	No
11a		
11b		
11c		

Section B. Type I Supporting Organizations

- 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? If "No," describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 2** Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in **Part VI** how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

- 1** Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in **Part VI** how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

	Yes	No
1		

Section D. All Type III Supporting Organizations

- 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?
- 2** Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in **Part VI** how the organization maintained a close and continuous working relationship with the supported organization(s).
- 3** By reason of the relationship described in 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? If "Yes," describe in **Part VI** the role the organization's supported organizations played in this regard.

	Yes	No
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

- 1** Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- a** ☐ The organization satisfied the Activities Test. Complete line 2 below.
- b** ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.
- c** ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions).

2 Activities Test. Answer lines 2a and 2b below.

- a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI** identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b** Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.

3 Parent of Supported Organizations. Answer lines 3a and 3b below.

- a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in **Part VI**.
- b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.

	Yes	No
2a		
2b		
3a		
3b		

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	Adjusted Net Income (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	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount 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	Minimum Asset Amount (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	Distributable Amount. 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).		

Schedule A (Form 990 or 990-EZ) 2020

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

Section D - Distributions		Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	1	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4 Amounts paid to acquire exempt-use assets	4	
5 Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5	
6 Other distributions (<i>describe in Part VI</i>). See instructions.	6	
7 Total annual distributions. Add lines 1 through 6.	7	
8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8	
9 Distributable amount for 2020 from Section C, line 6	9	
10 Line 8 amount divided by line 9 amount	10	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2020			
a From 2015			
b From 2016			
c From 2017			
d From 2018			
e From 2019			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016			
b Excess from 2017			
c Excess from 2018			
d Excess from 2019			
e Excess from 2020			

Schedule A (Form 990 or 990-EZ) 2020

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 REVENUE

2016 AMOUNT: \$ 23,391.

2017 AMOUNT: \$ 25,942.

2018 AMOUNT: \$ 12,831.

2019 AMOUNT: \$ 13,058.

2020 AMOUNT: \$ 2,542.

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2020

**Open to Public
Inspection**

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization AVIVO	Employer identification number 41-0828779
-----------------------------------	--------------------------------------------------

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political campaign activity expenditures	▶ \$	0.
3 Volunteer hours for political campaign activities		0.

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$	0.
2 Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$	0.
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4a Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
b If "Yes," describe in Part IV.		

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$	
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	▶ \$	
3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b	▶ \$	
4 Did the filing organization file Form 1120-POL for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.		

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

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

Schedule C (Form 990 or 990-EZ) 2020

LHA

032041 12-02-20

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
c Total lobbying expenditures (add lines 1a and 1b)															
d Other exempt purpose expenditures															
e Total exempt purpose expenditures (add lines 1c and 1d)															
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.															
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.			
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g Grassroots nontaxable amount (enter 25% of line 1f)															
h Subtract line 1g from line 1a. If zero or less, enter -0-															
i Subtract line 1f from line 1c. If zero or less, enter -0-															
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No													

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.)

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2020

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?	X		43,000.
j Total. Add lines 1c through 1i			43,000.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (See instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

PART II-B, LINE 1, LOBBYING ACTIVITIES:

A RETAINER WAS PAID A THIRD PARTY TO LOBBY ON THE BEHALF OF AVIVO WITH

RESPECT TO LEGISLATION THAT IMPACTS FUNDING FOR PROGRAMS THAT IMPACT

THOSE SERVED BY THE ORGANIZATION.

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

2020

Open to Public Inspection

Name of the organization

AVIVO

Employer identification number

41-0828779

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.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <input type="checkbox"/> Yes <input type="checkbox"/> No		

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (for example, recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$

(ii) Assets included in Form 990, Part X ▶ \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ \$

b Assets included in Form 990, Part X ▶ \$

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

Schedule D (Form 990) 2020

032051 12-01-20

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 exhibitiond ☐ Loan or exchange programb ☐ Scholarly researche ☐ Other _____c ☐ Preservation for future generations

- 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:

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

	Amount
1c	
1d	
1e	
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					3,250.
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					3,250.
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:

(i) Unrelated organizations

(ii) Related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

- b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? ☐

- 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		1,098,400.		1,098,400.
b Buildings		17,096,820.	5,413,047.	11,683,773.
c Leasehold improvements				
d Equipment		2,372,817.	1,763,973.	608,844.
e Other		5,476,807.	1,135,788.	4,341,019.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				17,732,036.

Schedule D (Form 990) 2020

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)		
Total. (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)		
Total. (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)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

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) REFUNDABLE ADVANCES	64,716.
(3) ASSET RETIREMENT OBLIGATION	124,475.
(4) LEADERSHIP BONUS ACCRUAL	45,500.
(5) OPERATING LEASE LIABILITY	4,302,188.
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	4,536,879.

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 ... ☒

Schedule D (Form 990) 2020

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.

1	Total revenue, gains, and other support per audited financial statements	1	35,823,267.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	69,028.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	6,877.
e	Add lines 2a through 2d	2e	75,905.
3	Subtract line 2e from line 1	3	35,747,362.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	35,747,362.

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.

1	Total expenses and losses per audited financial statements	1	31,350,737.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	69,028.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	69,028.
3	Subtract line 2e from line 1	3	31,281,709.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	31,281,709.

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 V, LINE 4:

THE ENDOWMENT FUNDS WERE MAINTAINED TO SUPPORT GENERAL PROGRAM OPERATIONS.

PART X, LINE 2:

THE ORGANIZATION IS CLASSIFIED AS A TAX-EXEMPT ORGANIZATION UNDER SECTION

501(C)(3) OF THE INTERNAL REVENUE CODE AND, ACCORDINGLY, IS NOT SUBJECT TO

FEDERAL INCOME TAXES. AS SUCH, IT IS SUBJECT TO FEDERAL AND STATE INCOME

TAXES ON NET UNRELATED BUSINESS INCOME. THE ORGANIZATION CURRENTLY HAS NO

UNRELATED BUSINESS INCOME.

THE ORGANIZATION FOLLOWS THE ACCOUNTING STANDARDS FOR CONTINGENCIES IN

EVALUATING UNCERTAIN TAX POSITIONS AND FILES AS A TAX-EXEMPT ORGANIZATION.

Part XIII Supplemental Information *(continued)*

SHOULD THAT STATUS BE CHALLENGED IN THE FUTURE, ALL YEARS SINCE INCEPTION

COULD BE SUBJECT TO REVIEW BY THE INTERNAL REVENUE SERVICE (IRS).

PART XI, LINE 2D - OTHER ADJUSTMENTS:

REVENUE REPORTED BY SUBSIDIARY

6,877.

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

2020

**Open to Public
Inspection**

Name of the organization

AVTVO

Part I	General Information on Grants and Assistance
--------	----------------------------------------------

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II **Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

[illegible]

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2020

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
CLOTHING ASSISTANCE	174	0.	5,671. FMV		STORED VALUE CARDS
HOUSING ASSISTANCE	1043	0.	3,663,620. FMV		HOUSING RELATED PAYMENTS TO LANDLORDS/UTILITIES
FOOD ASSISTANCE	1954	0.	394,518. FMV		STORED VALUE CARDS AND MEALS
LEGAL ASSISTANCE	70	0.	1,945. FMV		ASSISTANCE WITH DOCUMENT REQUIREMENTS
EDUCATION ASSISTANCE	2487	0.	553,615. FMV		TRAINING AND TUITION ASSISTANCE

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

ELIGIBILITY, SELECTION AND SUBSTANTIATION REQUIREMENTS ARE SPECIFIED BY THE

GRANTING ENTITIES. ALL SUCH REQUIREMENTS ARE DOCUMENTED ACCORDING TO THE

GRANTOR'S SPECIFICATIONS. ALL REQUESTS FOR GRANT AND ASSISTANCE PAYMENTS

ARE DOCUMENTED AND APPROVED PRIOR TO PAYMENT. PAYMENTS ARE GENERALLY MADE

TO APPROPRIATE SERVICE OR PRODUCT VENDORS RATHER THAN DIRECTLY TO THE

PROGRAM PARTICIPANT.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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 for instructions and the latest information.**

OMB No. 1545-0047

2020

**Open to Public
Inspection**

Name of the organization

AVIVO

Employer identification number

41-0828779

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.

☐ First-class or charter travel

☐ Housing allowance or residence for personal use

☐ Travel for companions

☐ Payments for business use of personal residence

☐ Tax indemnification and gross-up payments

☐ Health or social club dues or initiation fees

☐ Discretionary spending account

☐ Personal services (such as maid, chauffeur, chef)

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or 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.

☒ Compensation committee

☐ Written employment contract

☐ Independent compensation consultant

☒ Compensation survey or study

☐ Form 990 of other organizations

☒ 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

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

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

Schedule J (Form 990) 2020

Part III	Supplemental Information
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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.

[illegible]

**SCHEDULE K
(Form 990)**
Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

► Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020
Open to Public
Inspection

Name of the organization

AVIVO

Employer identification number
41-0828779

Part I Bond Issues SEE PART VI FOR COLUMN (F) CONTINUATIONS

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
A CITY OF LANDFALL VILLAGE MINNEAPOLIS COMMUNITY DEVELOPMENT		NONE	05/31/17	3,913,000.	TO REFINANCE EXISTING BONDS AND MORTGAGE NOTES,				X		X
B AGENCY	41-6009115	NONE	09/13/18	1,750,000.	CAPITAL PROJECTS				X		X
C											
D											

Part II Proceeds

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Amount of bonds retired								
2 Amount of bonds legally defeased								
3 Total proceeds of issue		3,913,000.		1,750,000.				
4 Gross proceeds in reserve funds								
5 Capitalized interest from proceeds								
6 Proceeds in refunding escrows								
7 Issuance costs from proceeds		92,228.						
8 Credit enhancement from proceeds								
9 Working capital expenditures from proceeds								
10 Capital expenditures from proceeds								
11 Other spent proceeds								
12 Other unspent proceeds								
13 Year of substantial completion	2017		2018					
14 Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?		X		X				
15 Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?		X		X				
16 Has the final allocation of proceeds been made?	X		X					
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X					

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

Schedule K (Form 990) 2020

Part III Private Business Use

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X				
2 Are there any lease arrangements that may result in private business use of bond-financed property?		X		X				
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X		X				
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		X		X				
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		.00		.00		%		%
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		.00		.00		%		%
6 Total of lines 4 and 5		.00		.00		%		%
7 Does the bond issue meet the private security or payment test?		X		X				
8a Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued?		X		X				
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of						%		%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?		X		X				

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X				
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?	X		X					
b Exception to rebate?		X		X				
c No rebate due?		X		X				
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?		X		X				

SCHEDULE O
(Form 990 or 990-EZ)

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 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public
Inspection

Name of the organization

AVIVO

Employer identification number

41-0828779

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

HOMELESSNESS.

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:

WITH INCREASED NEED IN OUR COMMUNITIES, AVIVO GREW IN RESPONSE AND IN

2020 RECEIVED \$3.2 MILLION FROM THE U.S. DEPARTMENT OF TREASURY

CORONAVIRUS RELIEF FUND. THIS FUNDING CREATED TWO NEW PROGRAMS: THE

HOTEL-TO-HOME PROGRAM (\$1,500,000) AND AVIVO VILLAGE (\$2,600,000). AS

OUR AUDITED FINANCIALS AND ANNUAL REPORT SHOW, THE ACCOUNTING BEHIND

THIS FUNDING SHOWS A SIGNIFICANT SURPLUS FOR 2020. SEE BELOW FOR

DESCRIPTIONS OF THESE TWO NEW PROGRAMS.

HOTEL-TO-HOME WAS A PROGRAM THAT ASSISTED APPROXIMATELY 200 INDIVIDUALS

TO MOVE FROM UNSHELTERED HOMELESSNESS TO A HOTEL. THE FUNDING RECEIVED

SUPPORTED THE COSTS FOR THE OPERATIONS AND THE HOTEL, THE FOOD AND

SUPPLIES NEEDED FOR CLIENTS AND THE STAFF COSTS TO MOVE THESE

INDIVIDUALS INTO PERMANENT HOUSING FROM THE HOTEL. THIS FUNDING WAS

EXPENSED WHEN RECEIVED.

BASED ON THE INCREASED NUMBERS OF PEOPLE EXPERIENCING UNSHELTERED

HOMELESSNESS IN THE METRO AND HOPES OF A MORE COMMUNITY-BASED AND

FINANCIALLY EFFICIENT MODEL, AVIVO VILLAGE BEGAN BEING BUILT IN

NOVEMBER 2020. THE \$2.6 MILLION RECEIVED WAS FOR THE CONSTRUCTION OF

THE 100 SHELTERS AND CONVERTING AN EMPTY WAREHOUSE SPACE INTO A

LOW-BARRIER, HARM-REDUCTION EMERGENCY SHELTER. AVIVO VILLAGE WILL BE

OPEN FOR 2 TO 6 YEARS AND THIS REVENUE WAS ALL RECOGNIZED IN 2020

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

Schedule O (Form 990 or 990-EZ) 2020

032211 11-20-20

Name of the organization

AVIVO

Employer identification number

41-0828779

WITHOUT THE EXPENSES OF THE BUILDING-USE (DEPRECIATION) BEING INCURRED.

BY THE END OF 2020, AVIVO VILLAGE HAD 16 RESIDENTS AND CAPACITY FOR 100

BY THE END OF THE FIRST QUARTER 2021.

IN ADDITION TO THE ABOVE REVENUE GROWTH, AVIVO'S BALANCE SHEET WAS

SUBSTANTIALLY IMPACTED BY THE CAPITAL ADDITION OF AVIVO VILLAGE, AS

WELL AS THE PURCHASE OF THREE TRANSITIONAL RECOVERY HOUSING BUILDINGS

IN THE FOURTH QUARTER OF 2020. AVIVO SECURED NATURALLY OCCURRING

AFFORDABLE HOUSING (NOAH) FUNDS AND OPTIMAL FINANCING BY PARTNERING

WITH GREATER MINNESOTA HOUSING FUND TO INVEST IN PROPERTY NEEDED TO

MEET OUR CURRENT PROGRAMMING NEEDS. AVIVO ALSO RECEIVED A \$3.2 MILLION

PPP LOAN SIGNIFICANTLY INCREASING CASH ASSETS IN 2020.

FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES:

SEE EXPLANATION ABOVE.

FORM 990, PART III, LINE 4C

AVIVO SERVES ALMOST 13,000 PEOPLE EACH YEAR WHO STRUGGLE WITH ADDICTION

TO DRUGS AND/OR ALCOHOL, MENTAL ILLNESS, UNEMPLOYMENT, UNDEREMPLOYMENT,

DISABILITIES, AND POVERTY. ACCOMPLISHMENTS IN THE PAST YEAR INCLUDE

HELPING 2,816 PEOPLE WITH SIGNIFICANT BARRIERS TO EMPLOYMENT FIND JOBS.

OUR PROGRAMS ALSO ASSISTED MORE THAN 2,000 WOMEN AND MEN AND THEIR

FAMILIES MOVE OFF OF PUBLIC ASSISTANCE. THANKS TO OUR CAREER

EDUCATION, 400 PEOPLE EARNED INDUSTRY RECOGNIZED CREDENTIALS THAT WILL

JUMPSTART THEIR CAREERS AND HELP THEM EARN A LIVING WAGE. IN ADDITION,

MORE THAN 6,000 PEOPLE BEGAN THE PATH TO RECOVERY AND WELLNESS THROUGH

OUR CHEMICAL AND MENTAL HEALTH SERVICES AND WE ASSISTED OVER 800 PEOPLE

FIND HOUSING AND SUPPORTIVE SERVICES TO AVERT HOMELESSNESS.

Name of the organization

AVIVO

Employer identification number

41-0828779

FORM 990, PART VI, SECTION A, LINE 1:

THE ORGANIZATION HAS AN EXECUTIVE COMMITTEE CONSISTING OF THE OFFICERS OF
THE BOARD AS ELECTED BY THE BOARD OF DIRECTORS. THE EXECUTIVE COMMITTEE HAS
ONLY THE POWERS AS DELEGATED AND SET FORTH BY THE BOARD OF DIRECTORS. ANY
ACTION TAKEN SHALL BE REPORTED IN MINUTES AND TO THE BOARD AT THE NEXT
BOARD MEETING.

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

THE PRESIDENT/CEO AND THE CHIEF FINANCIAL OFFICER WILL PERFORM A DETAILED
DRAFT REVIEW OF THE FORM 990 PRIOR TO FILING. THE FINANCE COMMITTEE OF THE
BOARD OF DIRECTORS WILL REVIEW A DRAFT OF THE FORM 990 AND MOVE FOR
APPROVAL TO THE BOARD OF DIRECTORS WHO WILL RECEIVE A COPY OF THE FORM 990
AND A REPORT FROM THE FINANCE COMMITTEE.

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

ALL AVIVO BOARD MEMBERS AND ALL EMPLOYEES ARE COVERED BY THE CONFLICT OF
INTEREST POLICY. ANNUALLY BOTH BOARD MEMBERS AND EMPLOYEES ARE REQUIRED TO
REVIEW THE CONFLICT OF INTEREST POLICY, IN ORDER TO DECLARE ANY, THUS FAR,
UNDECLARED CONFLICTS OF INTERESTS OR POTENTIAL CONFLICTS OF INTEREST. THE
BOARD CHAIRPERSON AND THE PRESIDENT/CEO REVIEW BOARD MEMBER CONFLICT OF
INTEREST DISCLOSURES. THE CONFLICT OF INTEREST DISCLOSURE FORM INCLUDES
INSTRUCTIONS TO THE BOARD MEMBER REGARDING THE MANNER IN WHICH THE BOARD
MEMBER MUST HANDLE SITUATIONS THAT COULD OR DO PRESENT A CONFLICT OF
INTEREST, SHOULD THESE SITUATIONS ARISE. THE BOARD CHAIRPERSON AND THE
PRESIDENT/CEO ARE RESPONSIBLE FOR ONGOING MONITORING OF BOARD MEMBER
ACTIONS THAT ARE POTENTIAL OR ACTUAL CONFLICTS.

Name of the organization

AVIVO

Employer identification number

41-0828779

THE EMPLOYEE'S SUPERVISOR AND THE PRESIDENT/CEO REVIEW EMPLOYEE CONFLICT OF INTEREST DISCLOSURES. THE CONFLICT OF INTEREST DISCLOSURE FORM INCLUDES INSTRUCTIONS TO THE EMPLOYEE REGARDING THE MANNER IN WHICH THE EMPLOYEE MUST HANDLE SITUATIONS THAT COULD OR DO PRESENT A CONFLICT OF INTEREST, SHOULD THESE SITUATIONS ARISE. EMPLOYEE'S SUPERVISORS ARE RESPONSIBLE FOR ONGOING MONITORING OF EMPLOYEE ACTIONS THAT ARE POTENTIAL OR ACTUAL CONFLICTS. EXAMPLES OF RESTRICTIONS INCLUDE:

1. REQUIRING A BOARD MEMBER EMPLOYED BY ANOTHER ORGANIZATION THAT COULD COMPETE FOR SIMILAR CONTRACTS NOT TO OBTAIN UNAUTHORIZED INFORMATION, OR IF SHE/HE IS IN POSSESSION OF INFORMATION IN THE COURSE OF PERFORMING HER/HIS BOARD DUTIES THAT IMPROVES THE COMPETITIVENESS OF HER/HIS EMPLOYER SHE/HE MAY NOT USE THIS INFORMATION TO HER/HIS ADVANTAGE.

2. REQUIRING AN EMPLOYEE WHO VOLUNTEERS AT ANOTHER NONPROFIT ORGANIZATION SIMILAR TO AVIVO NOT TO USE AVIVO CURRICULA OR APPROACHES AS A VOLUNTEER INSTRUCTOR.

IF A POTENTIAL CONFLICT ARISES DURING THE YEAR, THE DIVISION VICE PRESIDENT AND THE PRESIDENT/CEO, OR THE BOARD OF DIRECTORS SHALL DETERMINE WHETHER A CONFLICT OF INTEREST EXISTS AND WHETHER THE PROPOSED TRANSACTION MAY BE APPROVED. THE CONFLICT OF INTEREST TRANSACTION MAY NOT BE APPROVED UNLESS SUCH PERSON(S) OR BODY DETERMINES, IN THE EXERCISE OF GOOD FAITH JUDGMENT, THAT THE PROPOSED TRANSACTION IS FAIR AND REASONABLE AND, IF UNDERTAKEN, DOES NOT UNDERMINE OR CONFLICT WITH THE ORGANIZATION'S MISSION. IN EVERY CASE, THE INDIVIDUAL INVOLVED IN THE CONFLICT OF INTEREST WILL BE EXCLUDED FROM THE DISCUSSION AND APPROVAL OF THE PROPOSED TRANSACTION. DISCLOSURES AND PROCEEDINGS RELATED TO CONFLICTS OF INTEREST ARE DOCUMENTED IN THE MEETING MINUTES.

Name of the organization

AVIVO

Employer identification number

41-0828779

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

ANNUALLY, THE BOARD EXECUTIVE COMMITTEE REVIEWS THE COMPENSATION OF THE PRESIDENT/CEO. THE VICE PRESIDENT OF HUMAN RESOURCES PROVIDES THE BOARD EXECUTIVE COMMITTEE WITH NONPROFIT EXECUTIVE DIRECTOR COMPENSATION STUDIES. THESE STUDIES INCLUDE THE ANNUAL MINNEAPOLIS STAR TRIBUNE COMPENSATION REPORT FOR SOCIAL SERVICE EXECUTIVES AND THE MINNESOTA COUNCIL OF NONPROFIT SALARY SURVEY, WITH COMPENSATION INFORMATION PRESENTED ACCORDING TO THE BUDGET LEVEL OF THE ORGANIZATION. THE EXECUTIVE COMMITTEE DETERMINES THE COMPENSATION FOR THE PRESIDENT/CEO AND DOCUMENTS DELIBERATIONS IN MEETING MINUTES.

THE COMPENSATION OF OTHER OFFICERS IS REVIEWED IN THREE WAYS. SALARY LEVELS ARE ESTABLISHED BASED ON A REVIEW OF THE MINNESOTA COUNCIL OF NONPROFITS ANNUAL MINNESOTA NONPROFIT SALARY AND BENEFITS SURVEY. ALSO, ALL SALARY LEVELS ARE REVIEWED ANNUALLY BY THE VICE PRESIDENT OF HUMAN RESOURCES, ALONG WITH THE AGENCY'S POSITION CLASSIFICATION SYSTEM. PROPOSED ADJUSTMENTS TO THE SALARY SCHEDULE ARE PRESENTED ANNUALLY TO THE BOARD EXECUTIVE COMMITTEE FOR REVIEW AND APPROVAL. INDIVIDUAL COMPENSATION REVIEWS ARE THE RESPONSIBILITY OF THE KEY EMPLOYEE'S SUPERVISOR, UTILIZING THE CLASSIFICATION SYSTEM SALARY SCHEDULE AND ADJUSTING SALARIES FOR MERIT INCREASES BASED ON PERFORMANCE AS THE ANNUAL PERFORMANCE APPRAISALS ARE CONDUCTED. A SKILLS BASED VOLUNTEER COMPLETED A COMPREHENSIVE MARKET SURVEY AND SALARY SCHEDULE FOR ALL LEVELS OF THE ORGANIZATION IN 2016.

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

THE ORGANIZATION DOES NOT MAKE ITS GOVERNING DOCUMENTS AVAILABLE TO THE PUBLIC. THE ORGANIZATION DOES MAKE ITS CONFLICT OF INTEREST POLICY AND

Name of the organization

AVIVO

Employer identification number

41-0828779

FINANCIAL STATEMENTS AVAILABLE ON THE ORGANIZATION'S WEBSITE AND UPON

REQUEST.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.

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

OMB No. 1545-0047

2020

Open to Public
Inspection

Name of the organization

AVIVO

Employer identification number

41-0828779

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
AVIVO HOUSING LLC - 85-4014510 1900 CHICAGO AVENUE MINNEAPOLIS, MN 55404	PROVIDE HOUSING FOR INDIVIDUALS EXPERIENCING OR AT RISK OF HOMELESSNESS.	MINNESOTA	0.	5,855,000.	AVIVO

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
HELP ENABLE ALCOHOLICS/ADDICTS RECEIVE TREATMENT, INC. - 23-7259792, 1900 CHICAGO AVENUE, MINNEAPOLIS, MN 55404	HELP PEOPLE WITH CHEMICAL DEPENDENCY RECEIVE TREATMENT	MINNESOTA	501(C)(3)	LINE 7	AVIVO		X

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

SEE PART VII FOR CONTINUATIONS

Schedule R (Form 990) 2020

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)	X	
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

PART I, IDENTIFICATION OF DISREGARDED ENTITIES:**NAME, ADDRESS, AND EIN OF DISREGARDED ENTITY:**

AVIVO HOUSING LLC

EIN: 85-4014510

1900 CHICAGO AVENUE

MINNEAPOLIS, MN 55404

PRIMARY ACTIVITY: PROVIDE HOUSING FOR INDIVIDUALS EXPERIENCING OR AT RISK
OF HOMELESSNESS.

DIRECT CONTROLLING ENTITY: AVIVO

AVIVO AND SUBSIDIARIES
CONSOLIDATED FINANCIAL STATEMENTS
YEARS ENDED DECEMBER 31, 2020 AND 2019

**AVIVO AND SUBSIDIARIES
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YEARS ENDED DECEMBER 31, 2020 AND 2019**

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INDEPENDENT AUDITORS' REPORT

Board of Directors
Avivo and Subsidiaries
Minneapolis, Minnesota

Report on the Consolidated Financial Statements

We have audited the accompanying consolidated financial statements of Avivo and Subsidiaries (the Organization) (a nonprofit organization), which comprise the consolidated statements of financial position as of December 31, 2020 and 2019, and the related consolidated statements of activities and changes in net assets, functional expense, and cash flows for the years then ended, and the related notes to the consolidated financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these consolidated financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of consolidated financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

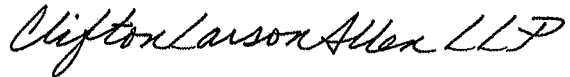
Our responsibility is to express an opinion on these consolidated financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the consolidated financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the consolidated financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the consolidated financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the consolidated financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the consolidated financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the consolidated financial position of Avivo and Subsidiaries as of December 31, 2020 and 2019, and the changes in their net assets and their cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

A handwritten signature in cursive script that reads "CliftonLarsonAllen LLP".

CliftonLarsonAllen LLP

Minneapolis, Minnesota
March 24, 2021

AVIVO AND SUBSIDIARIES
CONSOLIDATED STATEMENTS OF FINANCIAL POSITION
DECEMBER 31, 2020 AND 2019

ASSETS	<u>2020</u>	<u>2019</u>
CURRENT ASSETS		
Cash and Cash Equivalents	\$ 6,756,559	\$ 1,313,525
Accounts Receivable (Less Allowance for Doubtful Accounts of \$166,960 in 2020 and \$151,589 in 2019)	4,199,555	2,985,868
Pledges Receivable	166,744	503,000
Prepaid Expenses	928,196	483,793
Total Current Assets	<u>12,051,054</u>	<u>5,286,186</u>
OTHER ASSETS		
Charitable Remainder Unitrust	317,314	310,437
Unemployment Trust	73,191	251,983
Pledges Receivable Noncurrent	-	4,000
Right of Use Asset - Operating	4,297,453	1,700,481
Right of Use Asset - Finance	-	188,339
Property and Equipment, Net	13,434,583	5,613,756
Total Other Assets	<u>18,122,541</u>	<u>8,068,996</u>
Total Assets	<u><u>\$ 30,173,595</u></u>	<u><u>\$ 13,355,182</u></u>
LIABILITIES AND NET ASSETS		
CURRENT LIABILITIES		
Accounts Payable	\$ 433,293	\$ 361,468
Accrued Expense	3,114,031	1,579,441
Notes Payable - Current	360,491	255,697
Lease Liability - Current Operating	1,019,291	557,318
Lease Liability - Current Finance	-	70,778
Refundable Advances	64,716	65,461
Deferred Revenue	254,979	51,152
Total Current Liabilities	<u>5,246,801</u>	<u>2,941,315</u>
LONG-TERM LIABILITIES		
Notes Payable - Long Term	12,857,392	4,788,325
Lease Liability - Long-Term Operating	3,282,897	1,169,677
Lease Liability - Long-Term Finance	-	144,394
Asset Retirement Obligation	124,475	121,971
Total Long-Term Liabilities	<u>16,264,764</u>	<u>6,224,367</u>
Total Liabilities	21,511,565	9,165,682
NET ASSETS		
Without Donor Restrictions	6,360,317	3,280,740
With Donor Restrictions	2,301,713	908,760
Total Net Assets	<u>8,662,030</u>	<u>4,189,500</u>
Total Liabilities and Net Assets	<u><u>\$ 30,173,595</u></u>	<u><u>\$ 13,355,182</u></u>

See accompanying Notes to Consolidated Financial Statements.

AVIVO AND SUBSIDIARIES
CONSOLIDATED STATEMENTS OF ACTIVITIES AND CHANGES IN NET ASSETS
YEARS ENDED DECEMBER 31, 2020 AND 2019

	2020			2019		
	Without Donor Restrictions	With Donor Restrictions	Total	Without Donor Restrictions	With Donor Restrictions	Total
SUPPORT AND REVENUE						
Government Contracts	20,489,849	\$ -	\$ 20,489,849	\$ 17,335,068	\$ -	\$ 17,335,068
Program Service Fees	11,597,055	-	11,597,055	9,613,417	-	9,613,417
Contributions (Including In-Kinds of \$69,028 and \$13,000 in 2020 and 2019, Respectively)	1,184,640	2,236,986	3,421,626	469,110	938,000	1,407,110
United Way	173,000	156,000	329,000	234,900	171,250	406,150
Change in Value of Trust	-	6,877	6,877	-	53,439	53,439
Interest Income	3,426	-	3,426	-	-	-
(Loss) Gain on Disposal of Property and Equipment	(72,432)	-	(72,432)	(80,107)	-	(80,107)
Miscellaneous	47,866	-	47,866	58,270	-	58,270
Net Assets Released from Restriction	1,006,910	(1,006,910)	-	1,020,826	(1,020,826)	-
Total Support and Revenue	34,430,314	1,392,953	35,823,267	28,651,484	141,863	28,793,347
EXPENSE						
Program Services:						
Career Education	2,946,759	-	2,946,759	2,861,915	-	2,861,915
Employment Services	5,216,849	-	5,216,849	5,665,950	-	5,665,950
Chemical and Mental Health	19,879,814	-	19,879,814	17,203,096	-	17,203,096
Total Program Services	28,043,422	-	28,043,422	25,730,961	-	25,730,961
Support Services:						
Management and General	2,828,373	-	2,828,373	2,538,882	-	2,538,882
Fundraising	478,942	-	478,942	442,059	-	442,059
Total Support Services	3,307,315	-	3,307,315	2,980,941	-	2,980,941
Total Expense	31,350,737	-	31,350,737	28,711,902	-	28,711,902
CHANGE IN NET ASSETS						
	3,079,577	1,392,953	4,472,530	(60,418)	141,863	81,445
Net Assets - Beginning of Year	3,280,740	908,760	4,189,500	3,341,158	766,897	4,108,055
NET ASSETS - END OF YEAR	\$ 6,360,317	\$ 2,301,713	\$ 8,662,030	\$ 3,280,740	\$ 908,760	\$ 4,189,500

See accompanying Notes to Consolidated Financial Statements.

AVIVO AND SUBSIDIARIES
CONSOLIDATED STATEMENT OF FUNCTIONAL EXPENSE
YEAR ENDED DECEMBER 31, 2020

	Program Services				Support Services			Total All Services
	Career Education	Employment Services	Chemical and Mental Health	Total Program Services	Management and General	Fundraising	Total Support Services	
Salaries	\$ 1,425,977	\$ 3,385,503	\$ 9,020,571	\$ 13,832,051	\$ 1,634,058	\$ 288,353	\$ 1,922,411	\$ 15,754,462
Payroll Taxes	128,845	300,777	830,817	1,260,439	145,558	27,011	172,569	1,433,008
Employee Benefits	152,954	395,015	900,593	1,448,562	157,803	17,747	175,550	1,624,112
Total Personnel Costs	1,707,776	4,081,295	10,751,981	16,541,052	1,937,419	333,111	2,270,530	18,811,582
Assistance Provided to Individuals	668,576	329,811	4,945,592	5,943,979	-	-	-	5,943,979
Professional Fees	174,786	32,312	370,821	577,919	268,225	45,219	313,444	891,363
Occupancy	123,243	435,884	2,002,118	2,561,245	148,126	23,767	171,893	2,733,138
Supplies	73,638	52,588	471,288	597,514	103,144	14,981	118,125	715,639
Interest Expense	7,095	17,466	141,317	165,878	11,709	1,981	13,690	179,568
Technology and Communication	24,208	47,978	99,131	171,317	32,495	1,940	34,435	205,752
Postage and Shipping	912	18,829	15,693	35,434	8,155	272	8,427	43,861
Printing and Publications	620	1,000	11,551	13,171	16,660	849	17,509	30,680
Local Transportation	19,833	5,045	85,487	110,365	760	26	786	111,151
Conferences and Meetings	7,209	5,680	43,847	56,736	20,081	38,796	58,877	115,613
Equipment	51,052	77,398	253,692	382,142	61,196	2,980	64,176	446,318
Insurance	9,790	13,424	54,836	78,050	43,553	1,282	44,835	122,885
Membership Dues	4,471	-	16,029	20,500	76,231	110	76,341	96,841
Uncollectible Accounts	2,500	-	262,647	265,147	-	-	-	265,147
Depreciation	70,925	98,105	330,183	499,213	66,496	5,826	72,322	571,535
Other Expense	125	34	23,601	23,760	34,123	7,802	41,925	65,685
Total Expense	\$ 2,946,759	\$ 5,216,849	\$ 19,879,814	\$ 28,043,422	\$ 2,828,373	\$ 478,942	\$ 3,307,315	\$ 31,350,737

See accompanying Notes to Consolidated Financial Statements.

AVIVO AND SUBSIDIARIES

	Program Services			Support Services				
	Career Education	Employment Services	Chemical and Mental Health	Total Program Services	Management and General	Fundraising	Total Support Services	Total All Services
Salaries	\$ 1,631,379	\$ 3,395,295	\$ 8,381,603	\$ 13,408,277	\$ 1,597,790	\$ 261,670	\$ 1,859,460	\$ 15,267,737
Payroll Taxes	126,958	264,201	657,936	1,049,095	117,143	20,195	137,338	1,186,433
Employee Benefits	193,819	488,386	1,081,422	1,763,627	183,062	23,958	207,020	1,970,647
Total Personnel Costs	1,952,156	4,147,882	10,120,961	16,220,999	1,897,995	305,823	2,203,818	18,424,817
Assistance Provided to								
Individuals	248,737	453,668	3,354,177	4,056,582	-	-	-	4,056,582
Professional Fees	196,431	41,221	463,496	701,148	233,187	62,473	295,660	996,808
Occupancy	197,903	609,884	1,536,493	2,344,280	88,784	9,293	98,077	2,442,357
Supplies	52,645	54,687	313,210	420,542	87,140	13,280	100,420	520,962
Interest Expense	21,708	29,112	118,940	169,760	14,450	1,040	15,490	185,250
Technology and Communication	35,141	49,141	123,198	207,480	21,270	2,296	23,566	231,046
Postage and Shipping	1,195	14,679	4,165	20,039	7,624	1,109	8,733	28,772
Printing and Publications	759	686	5,135	6,580	7,380	3,434	10,814	17,394
Local Transportation	30,062	22,443	201,214	253,719	2,411	210	2,621	256,340
Conferences and Meetings	14,389	12,334	35,151	61,874	47,384	35,338	82,722	144,596
Equipment	35,654	124,090	149,559	309,303	19,008	1,111	20,119	329,422
Insurance	12,960	19,099	48,233	80,292	45,015	682	45,697	125,989
Membership Dues	1,585	243	11,022	12,850	26,565	1,893	28,458	41,308
Uncollectible Accounts	-	-	439,211	439,211	-	-	-	439,211
Depreciation	59,030	85,115	245,817	389,962	16,864	2,688	19,552	409,514
Other Expense	1,560	1,666	33,114	36,340	23,805	1,389	25,194	61,534
Total Expense	\$ 2,861,915	\$ 5,665,950	\$ 17,203,096	\$ 25,730,961	\$ 2,538,882	\$ 442,059	\$ 2,980,941	\$ 28,711,902

See accompanying Notes to Consolidated Financial Statements.

AVIVO AND SUBSIDIARIES
CONSOLIDATED STATEMENT OF CASH FLOWS
YEARS ENDED DECEMBER 31, 2020 AND 2019

	2020	2019
CASH FLOWS FROM OPERATING ACTIVITIES		
Change in Net Assets	\$ 4,472,530	\$ 81,445
Adjustments to Reconcile Change in Net Assets to		
Net Cash Provided by Operating Activities:		
Realized and Unrealized Loss on Investments	-	940
Donated Property and Equipment	(50,900)	-
Principal Payments on Operating Leases	(746,683)	(575,181)
Operating Lease Amortization	724,904	581,049
Noncash Lease Expenses	-	24,877
Change in Value of Charitable Remainder Unitrust	(6,877)	(53,439)
Change in Value of Unemployment Trust	178,792	22,343
Loss on Disposal of Fixed Assets	72,432	80,107
Depreciation	571,535	409,514
Environmental Remediation Liabilities	2,504	(4,638)
Uncollectible Accounts	265,147	439,211
(Increase) Decrease in Current Assets:		
Accounts and Grant Receivable	(2,700,533)	(117,523)
Pledges Receivable	340,256	(147,008)
Prepaid Expense	(444,403)	63,354
Increase (Decrease) in Current Liabilities:		
Accounts Payable	71,825	89,130
Accrued Expenses	1,534,590	(121,989)
Refundable Advances	(745)	40,306
Deferred Revenue	203,827	38,282
Net Cash Provided by Operating Activities	4,488,201	850,780
CASH FLOWS FROM INVESTING ACTIVITIES		
Purchase of Property and Equipment	(7,003,856)	(141,694)
CASH FLOWS FROM FINANCING ACTIVITIES		
Proceeds on Issuance of Debt	8,404,889	-
Principal Payments on Debt	(231,028)	(238,643)
Principal Payments on Finance Leases	(215,172)	(21,490)
Net Cash Provided (Used) by Financing Activities	7,958,689	(260,133)
NET INCREASE IN CASH AND CASH EQUIVALENTS	5,443,034	448,953
Cash and Cash Equivalents - Beginning of Year	1,313,525	864,572
CASH AND CASH EQUIVALENTS - END OF YEAR	<u>\$ 6,756,559</u>	<u>\$ 1,313,525</u>
SUPPLEMENTAL DISCLOSURE OF CASH FLOW INFORMATION		
Operating Expenses Financed Through Lease	<u>\$ -</u>	<u>\$ 24,877</u>
Cash Paid for Interest	<u>\$ 195,274</u>	<u>\$ 185,242</u>
Noncash Right of Use Asset (See Note 5)	<u>\$ 3,321,876</u>	<u>\$ 2,481,749</u>
Constructions Costs Incurred Included in Accrued Expenses	<u>\$ 1,221,699</u>	<u>\$ -</u>

See accompanying Notes to Consolidated Financial Statements.

AVIVO AND SUBSIDIARIES
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
DECEMBER 31, 2020 AND 2019

NOTE 1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Organizational Purpose

Avivo (the Organization) is a nonprofit organization whose mission is to increase well-being through recovery, employment, and career advancement. Annually, the Organization serves nearly 18,000 individuals and families through:

Career Education – Provides career training programs and job placement services for people with disabilities and other barriers to employment.

Employment Services – Provides employment services, education, and family-support services to low-income adults, youth, and families to ensure economic success, academic achievement, and family stability.

Chemical and Mental Health – Supports low-income men, women, and families in recovery through integrated, trauma-informed care-access, treatment, recovery support, and care coordination to help them achieve wellness and life-long recovery.

During 2020, Avivo LLC was formed and has the charitable purpose of providing transitional housing for individuals experiencing homelessness or at-risk homelessness who are participants in Avivo's recovery, career advancement or ending homelessness programs as they transition to permanent housing.

Principles of Consolidation

The accompanying consolidated financial statements include the accounts of Avivo, Avivo LLC and HEART, Inc. All significant intercompany balances and transactions have been eliminated.

Financial Statement Presentation

Net assets and revenues, gains, and losses are classified based on donor-imposed restrictions. Accordingly, net assets of the Organization and changes therein are classified and reported as follows:

Net Assets Without Donor Restrictions – Resources over which the board of directors has discretionary control. Designated amounts represent amounts which the board has set aside for a particular purpose.

Net Assets With Donor Restrictions – Those resources subject to donor-imposed restrictions which will be satisfied by actions of the Organization or passage of time.

Cash and Cash Equivalents

For purposes of the statements of cash flows, the Organization considers all highly liquid debt instruments purchased with an original maturity of three months or less to be cash equivalents.

AVIVO AND SUBSIDIARIES
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
DECEMBER 31, 2020 AND 2019

NOTE 1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Accounts Receivable

Accounts receivable are stated at net realizable value. The Organization provides an allowance for bad debts using the allowance method, which is based on management judgment considering historical information and specific payor limitations. Accounts past due are individually analyzed for collectibility. An allowance is provided for accounts when a significant pattern of uncollectibility has occurred. When all collection efforts have been exhausted, the accounts are written off against the related allowance.

Promises-to-Give (Pledges Receivable)

Unconditional promises-to-give are recognized in the period the promises are made. Conditional promises-to-give are recognized when the conditions on which they depend are substantially met, that is, when the conditional promise becomes unconditional. Pledges receivable at December 31, 2020 are expected to be received through 2021.

Investments

Investments are stated at fair value based on quoted market prices and consist of contributions received of shares of stock.

Leases

The Organization determines if an arrangement is a lease at inception. Operating leases are included in right-of-use (ROU) assets—operating and lease liability, and finance leases are included in ROU assets—financing and lease liability in the statements of financial position.

ROU assets represent the Organization's right to use an underlying asset for the lease term and lease liabilities represent the Organization's obligation to make lease payments arising from the lease. ROU assets and liabilities are recognized at commencement date based on the present value of lease payments over the lease term. Lease terms may include options to extend or terminate the lease when it is reasonably certain that the Organization will exercise that option. Lease expense for operating lease payments is recognized on a straight-line basis over the lease term. The Organization has elected to recognize payments for short-term leases with a lease term of 12 months or less as expense as incurred and these leases are not included as lease liabilities or right of use assets on the statements of financial position.

The individual lease contracts do not provide information about the discount rate implicit in the lease. Therefore, the Organization has elected to use their incremental borrowing rate.

The Organization has elected not to separate nonlease components from lease components and instead account for each separate lease component and the nonlease component as a single lease component.

Property and Equipment

All major expenditures for property and equipment that are over \$5,000 are capitalized at cost. Contributed items are recorded at fair market value at date of donation. Depreciation is calculated using the straight-line method over the estimated useful lives.

AVIVO AND SUBSIDIARIES
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
DECEMBER 31, 2020 AND 2019

NOTE 1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Charitable Remainder Unitrust

HEART, Inc. is party to a Trust Agreement for which they are the remainder beneficiary upon the death of the lead beneficiary. The interest in the charitable remainder unitrust is carried at fair value based on the life expectancy of lead beneficiary and the fair value of the trust assets.

Unemployment Trust

The Organization has an unemployment trust agreement for which they make contributions to cover future claims from former employees.

Asset Retirement Obligations

The Organization owns buildings that contain asbestos floor tiles. At this time, the Organization has no plans to renovate or demolish these buildings. In accordance with standards relating to Accounting for Conditional Asset Retirement Obligations, the Organization accrued a liability for the fair value of future costs to remediate environmental hazards related to certain property. The Organization uses a future value rate assumption of 3% and discounted the estimate to present value using a risk-free rate of return of 3%. The potential environmental remediation liability is reported on the consolidated statements of financial position as an asset retirement obligation in the amount of \$124,475 and \$121,971 at December 31, 2020 and 2019, respectively.

Government Contracts

Conditional government grants and contract funds are recorded as revenue when earned. Revenue is earned when eligible expenditures, as defined in each contract, are made. Funds received but not yet earned are shown as Deferred Revenue. Expenditures under government contracts are subject to review by the granting authority. To the extent, if any, that such a review reduces expenditures allowable under these contracts, the Organization will record such disallowance at the time the final assessment is made. The Organization received federal and state grants of \$284,555 that have not been recognized at December 31, 2020 because qualifying expenditures have not yet been incurred.

Contributions

Contributions are recognized as revenue in the period received or unconditionally promised, whichever is earlier. They are recorded as increases in net assets without donor restrictions if the restrictions expire (that is, when a stipulated time restriction ends or purpose restriction is accomplished) in the reporting period in which the revenue is recognized. All other donor-restricted contributions are reported as increases in net assets with donor restrictions. When a restriction expires, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the consolidated statements of activities as net assets released from restrictions.

AVIVO AND SUBSIDIARIES
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
DECEMBER 31, 2020 AND 2019

NOTE 1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Program Service Fees

Program Service Fees are reported at the amount that reflects the consideration to which the Organization expects to be entitled in exchange for providing services to their program participants. These amounts are due from patients, third-party payors (including health insurers and government programs), and others and includes variable consideration for retrospective revenue adjustments due to settlement of audits, reviews, and investigations. Generally, the Organization bills the participants and third-party payors several days after the services are performed and/or participant is discharged from the program. Revenue is recognized as performance obligations are satisfied.

Performance obligations are determined based on the nature of the services provided by the Organization. Revenue for performance obligations satisfied over time is recognized based on actual charges incurred in relation to total expected (or actual) charges. The Organization believes that this method provides a faithful depiction of the transfer of services over the term of the performance obligation based on the inputs needed to satisfy the obligation.

The Organization measures the performance obligation from admission into the program, or the commencement of an outpatient service, to the point when it is no longer required to provide services to that participant, which is generally at the time of discharge or completion of the program.

In-Kind Contributions

Contribution of donated services that create or enhance nonfinancial assets or increase fixed assets that require specialized skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation, are recorded at their fair values in the period received. The contributions presented on the accompanying consolidated statements of activities and changes in net assets include contributed materials and services valued at \$69,028 and \$13,000 for the years ended December 31, 2020 and 2019, respectively.

Functional Allocation of Expense

Salaries and related expenses are allocated based on time spent and program assignments. Occupancy and depreciation expenses are allocated based on direct program or support service usage. Other expenses, such as professional fees are directly identified to specific programs or administrative functions.

Risks and Uncertainties

Management uses estimates and assumptions in preparing the consolidated financial statements. Those estimates and assumptions affect the reported amounts of assets and liabilities, the disclosure of contingent assets and liabilities, and the reported revenues and expenses.

AVIVO AND SUBSIDIARIES
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
DECEMBER 31, 2020 AND 2019

NOTE 1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Risks and Uncertainties (Continued)

During the fiscal year, the World Health Organization declared the spread of Coronavirus Disease (COVID-19), a worldwide pandemic. Subsequent to year-end, the COVID-19 pandemic continues to have significant effects on global markets, supply chains, businesses, and communities. Specific to Avivo, COVID-19 may impact various parts of its 2021 operations and financial results. Management believes Avivo is taking appropriate actions to mitigate the negative impact. However, the full impact of COVID-19 is unknown and cannot be reasonably estimated as these events are still developing.

Federal Income Taxes

The Organization is classified as a tax-exempt organization under Section 501(c)(3) of the Internal Revenue Code and, accordingly, is not subject to federal income taxes. As such, it is subject to federal and state income taxes on net unrelated business income.

The Organization follows the accounting standards for contingencies in evaluating uncertain tax positions and files as a tax-exempt organization. Should that status be challenged in the future, all years since inception could be subject to review by the Internal Revenue Service.

Fair Value Measurements

The Organization has categorized its financial instruments, based on the priority of the inputs to the valuation technique, into a three-level fair value hierarchy. The fair value hierarchy gives the highest priority to quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). If the inputs used to measure the financial instruments fall within different levels of the hierarchy, the categorization is based on the lowest level input that is significant to the fair value measurement of the instrument.

Financial assets and liabilities recorded on the consolidated statements of financial position are categorized based on the inputs to the valuation techniques as follows:

Level 1 – Financial assets and liabilities are valued using inputs that are unadjusted quoted prices in active markets accessible at the measurement date of identical financial assets and liabilities. The inputs include those traded on an active exchange, such as the New York Stock Exchange, as well as U.S. Treasury and other U.S. government and agency mortgage-backed securities that are traded by dealers or brokers in active over the-counter markets.

Level 2 – Financial assets and liabilities are valued using inputs quoted prices for similar assets, or inputs that are observable, either directly or indirectly for substantially the full term through corroboration with observable market data. Level 2 includes private collateralized mortgage obligations, municipal bonds, and corporate debt securities.

Level 3 – Financial assets and liabilities are valued using pricing inputs which are unobservable for the asset, inputs that reflect the reporting entity's own assumptions about the assumptions market participants would use in pricing the asset. Level 3 includes private equity, venture capital, hedge funds, and real estate.

AVIVO AND SUBSIDIARIES
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
DECEMBER 31, 2020 AND 2019

NOTE 1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Fair Value Measurements (Continued)

The Organization has one Level 3 investment in their interest in the Charitable Remainder Unitrust that was valued at \$317,314 and \$310,436 at December 31, 2020 and 2019, respectively. There are no contributions to the unitrust and the value has changed based on the fair value calculation.

The following table provides a summary of changes in fair value of the Level 3 financial asset, the Charitable Remainder Unitrust for the years ended December 31:

	2020	2019
Balance - Beginning of Year	\$ 310,437	\$ 256,998
Change in Fair Value of Trust	6,877	53,439
Balance - End of Year	<u>\$ 317,314</u>	<u>\$ 310,437</u>

Subsequent Events

In preparing these consolidated financial statements, the Organization has evaluated events and transactions for potential recognition or disclosure through March 24, 2021, the date the consolidated financial statements were available to be issued.

NOTE 2 CONCENTRATIONS

Significant Concentrations of Credit Risk

The Organization provides services primarily within the Twin Cities and surrounding communities. The amounts due for services provided are from individuals, substantially all of which are local residents or their third-party payors. In addition, accounts and pledges receivable are primarily from local residents, governments, or institutions.

Concentrations of Credit Risk Arising from Cash Deposits in Excess of Insured Limits

At various times during 2020 and 2019, the Organization held funds at a local financial institution in excess of federally insured limits.

NOTE 3 PROPERTY AND EQUIPMENT

The Organization owns the following as of December 31:

	2020	2019
Land	\$ 1,098,400	\$ 894,700
Buildings and Leasehold Improvements	17,140,386	9,434,387
Equipment and Furniture	2,372,817	1,957,687
Total	20,611,603	12,286,774
Less: Accumulated Depreciation/Amortization	(7,177,020)	(6,673,018)
Property and Equipment, Net	<u>\$ 13,434,583</u>	<u>\$ 5,613,756</u>

AVIVO AND SUBSIDIARIES
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
DECEMBER 31, 2020 AND 2019

NOTE 3 PROPERTY AND EQUIPMENT (CONTINUED)

Depreciation expense was \$571,535 and \$409,514 for the years ended December 31, 2020 and 2019, respectively.

NOTE 4 NOTES PAYABLE

During the fiscal year ending December 31, 2020, the Organization received a loan in the amount of \$3,198,857 to fund payroll, rent, utilities, and interest on mortgages and existing debt through the federal Paycheck Protection Program (the PPP Loan). The original loan agreement was written prior to the PPP Flexibility Act of 2020 and was due over 24 months deferred for six months. Subsequent to this, the law changed the loan deferral terms retroactively. The PPP Flexibility Act and subsequent regulations supersede the loan agreement. The PPP Loan bears interest at a fixed rate of 1.0% per annum, has a term of two years, and is unsecured and guaranteed by the U.S. Small Business Administration. Payment of principal and interest is deferred until the date on which the amount of forgiveness is remitted to the lender or, if the Organization fails to apply for forgiveness within 10 months after the covered period, then payment of principal and interest shall begin on that date. These amounts may be forgiven subject to compliance and approval based on the timing and use of these funds in accordance with the program. To the extent that all or part of the PPP Loan is not forgiven, the Organization will be required to pay interest on the PPP Loan at a rate of 1.0% per annum, principal and interest payments will be required through the maturity date in April 15, 2022.

Additionally, the Organization entered into three loan agreements to purchase three properties. Two of the loans entered into were with Greater Minnesota Housing Fund and the other loan was entered with the City of Minneapolis.

Notes payable consists of the following at December 31:

<u>Description</u>	<u>2020</u>	<u>2019</u>
2017 tax-exempt revenue bond issued by the city of Landfall, monthly amounts including interest of 3.02%. Last principal and interest payments due 2034.	\$ 3,314,650	\$ 3,509,717
2018 tax exempt revenue bond issued by Minneapolis Community Development Agency, monthly amounts including interest of 4.06%. Last payment and all remaining principal and interest due 2038.	1,621,528	1,682,159
Loan issued by the City of Minneapolis including interest of 3.75%. Payment of all principal and interest due 2045.	490,244	-
Loan issued by the Greater Minnesota Housing Fund, monthly amounts including interest of 3.75%. Last payment and all remaining principal and interest due	4,448,000	-
Loan issued by the Greater Minnesota Housing Fund, monthly amounts including interest of 3.75%. Last and all remaining principal and interest due 2035.	427,000	-

AVIVO AND SUBSIDIARIES
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
DECEMBER 31, 2020 AND 2019

NOTE 4 NOTES PAYABLE (CONTINUED)

<u>Description</u>	<u>2020</u>	<u>2019</u>
Loan issued by the Greater Minnesota Housing Fund, monthly amounts including interest of 3.75%. Last and all remaining principal and interest due 2035.	427,000	-
PPP Loan	<u>\$ 3,198,857</u>	<u>\$ -</u>
Total	13,500,279	5,191,876
Less: Portion Due Within One Year	(360,491)	(255,697)
Less: Unamortized Issuance Costs, Net	<u>(282,396)</u>	<u>(147,854)</u>
Long-Term Portion	<u><u>\$ 12,857,392</u></u>	<u><u>\$ 4,788,325</u></u>

Each note is secured by certain land, buildings, and improvements.

The City of Minneapolis loan is an interest free loan of \$1,250,000 and is due in 2045. The loan was discounted at a rate of 3.75% and this resulted in the principal due of \$490,244 and the remaining is considered a donor restricted contribution of \$759,756 on the consolidated statement of activities.

AVIVO AND SUBSIDIARIES
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
DECEMBER 31, 2020 AND 2019

NOTE 4 NOTES PAYABLE (CONTINUED)

Future principal payment amounts include payment due for debt outstanding at December 31, 2020, and amounts due under the expected refinancing. Principal payments required are as follows:

<u>Year Ending December 31,</u>	<u>Amount</u>
2021	\$ 360,491
2022	3,579,913
2023	394,371
2024	407,766
2025	422,421
Thereafter	8,335,317
Total	<u>\$ 13,500,279</u>

Effective August 8, 2017, the Organization entered into a promissory note with an original expiration date of July 31, 2019. Effective July 31, 2020, the Organization renewed the promissory note agreement. Available borrowings under the line of credit are \$1,000,000. Interest is payable monthly at the bank's index rate (3.25% at December 31, 2020). This promissory note is secured by all business assets. The note expires on July 31, 2021. At December 31, 2020 and 2019, there was \$-0- of borrowings on the note.

NOTE 5 LEASES

The Organization leases equipment as well as certain operating and office facilities for various terms under long-term, noncancelable lease agreements. The leases expire at various dates through 2023 and provide for renewal options up to three years. In the normal course of business, it is expected that these leases will be renewed or replaced by similar leases. Certain facility leases provide for increases in future minimum annual rental payments based on defined increases in the Consumer Price Index, subject to certain minimum increases. Also, the agreements generally require the Organization to pay real estate taxes, insurance, and repairs. The Organization does not have any covenants with these agreements or required to maintain certain financial ratios.

AVIVO AND SUBSIDIARIES
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
DECEMBER 31, 2020 AND 2019

NOTE 5 LEASES (CONTINUED)

The following table provides quantitative information concerning the Organization's leases.

	<u>2020</u>	<u>2019</u>
Lease Cost:		
Finance Lease Cost	\$ -	\$ 200,219
Amortization of Right-to-Use Asset	-	(11,880)
Operating Lease Cost	5,433,241	2,281,530
Amortization of Right-to-Use Asset	(1,135,788)	(581,049)
Total Lease Cost	<u>\$ 4,297,453</u>	<u>\$ 1,888,820</u>
Weighted Average Remaining Lease Term - Finance Leases	N/A	2.5 years
Weighted Average Remaining Lease Term - Operating Leases	3.4 Years	3.7 years
Weighted Average Discount Rate - Finance Leases	N/A	13.4 %
Weighted Average Discount Rate - Operating Leases	3.0 %	3.0 %

A maturity analysis of annual undiscounted cash flows for lease liabilities as of December 31, 2020 is as follows:

<u>Year Ending December 31,</u>	<u>Operating Leases</u>
2021	\$ 1,135,446
2022	975,773
2023	827,361
2024	606,616
2025	560,673
Thereafter	534,074
Total	<u>\$ 4,639,943</u>

NOTE 6 NET ASSETS WITH DONOR RESTRICTIONS

Net assets with donor restrictions consist of amounts for the following programs at December 31:

	<u>2020</u>	<u>2019</u>
Employment Services	\$ -	\$ 17,156
Career Education	231,415	331,460
Chemical and Mental Health	798,761	135,293
General Fundraising	954,223	114,414
Charitable Remainder Unitrust	317,314	310,437
Total	<u>\$ 2,301,713</u>	<u>\$ 908,760</u>

The General Fundraising line includes the donor restricted contribution of \$759,756 relating to the City of Minneapolis interest free loan. See Note 4 for more details.

AVIVO AND SUBSIDIARIES
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
DECEMBER 31, 2020 AND 2019

NOTE 6 NET ASSETS WITH DONOR RESTRICTIONS (CONTINUED)

Net assets with donor restrictions released from restriction related to the following programs for the years ended December 31:

	2020	2019
Employment Services	\$ 17,156	\$ 250,746
Career Education	291,815	570,832
Chemical and Mental Health	255,353	178,440
General Fundraising	442,586	20,808
Total	<u>\$ 1,006,910</u>	<u>\$ 1,020,826</u>

NOTE 7 PROGRAM FEE FOR SERVICE CONTRACT REVENUE

The Organization's program fee for services revenue is recognized at a point in time according to the timing of transfer of services and is all from third-party payors. The total program fee for services revenue recognized for the years ended December 31, 2020 and 2019 was \$11,597,055 and \$9,613,417, respectively.

There is no contract revenue that is recognized over a period of time.

NOTE 8 CONTRACT ASSETS

The Organization's contract assets consist of:

	2020	2019
Accounts Receivable:		
Program Fee for Service - Third Party Payor	\$ 1,053,633	\$ 1,623,218
Accounts Receivables:		
(Nonexchange Transactions)	3,145,922	1,362,650
Total Accounts Receivables	<u>\$ 4,199,555</u>	<u>\$ 2,985,868</u>

NOTE 9 EMPLOYEE RETIREMENT PLAN

The Organization maintains a 401(k) retirement plan for employees. Employees are allowed to make voluntary contributions immediately after six months of employment. The Organization has the ability to make discretionary matches to the 401(k) but did not make discretionary contributions for the years ended December 31, 2020 and 2019. Additionally, the Organization makes an annual 3% nondiscretionary safe harbor payment. During fiscal year 2020, as a result of the Coronavirus pandemic, the plan was only active for the first three months of the year. The total expense for the years ended December 31, 2020 and 2019 was \$93,522 and \$404,578, respectively.

AVIVO AND SUBSIDIARIES
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
DECEMBER 31, 2020 AND 2019

NOTE 10 CONTINGENCIES

In the normal course of business, the Organization has claims made against them. As of December 31, 2020, the amount and likelihood of loss is not determined. The Organization believes these claims are without merit and intends to vigorously defend the matters.

NOTE 11 LIQUIDITY AND AVAILABILITY

Financial assets available for general expenditure, that is, without donor or other restrictions limiting their use, within one year of the statement of financial position date, comprise the following as of December 31:

	2020	2019
Cash and Cash Equivalents	\$ 6,756,559	\$ 1,313,525
Less Restricted for Debt Service	(949,700)	-
Less Restricted for Purpose	<u>(1,984,399)</u>	<u>(118,744)</u>
Cash and Cash Equivalents Available Within Year	\$ 3,822,460	\$ 1,194,781
Accounts Receivable	4,199,555	2,985,868
Pledges Receivable	166,744	503,000
Less Restricted for Purpose	<u>(156,000)</u>	<u>(308,329)</u>
Pledges Receivable Available within Year	10,744	194,671
Total	<u><u>\$ 8,032,759</u></u>	<u><u>\$ 4,375,320</u></u>

As more fully described in Note 4, the Organization also has committed lines of credit in the amount of \$1,000,000, which it could draw upon in the event of an unanticipated liquidity need. The Organization regularly monitors liquidity to meet its operating needs and other contractual commitments. For purposes of analyzing resources available to meet general expenditures over a 12-month period, the Organization considers all expenditures related to its ongoing mission-related activities as well as the conduct of services undertaken to support those activities to be general expenditures.