## **Return of Organization Exempt From Income Tax**

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

OMB No. 1545-0047

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

Internal Revenue Service Solutions and the latest information.							Inspection		
-	_		dar year, or tax year beginning		, 2020, and ending			, 20	
_		ck if applicable: C Name of organization PARADOX SPORTS						D Employer identification number	
	Address change Doing business as					26-0153796			
_		Name change Number and street (or P.O. box if mail is not delivered to street address)				Doom/suits	Room/suite E Telephone number		
-	Initial return  PO BOX 273				noonvsuite	(720)638-5593			
_							(720	1030-3373	
H		City or town, state or province, country, and ZIP or foreign postal code  Amended return  ELDORADO SPRINGS, CO 80025						maninta ¢ 304 636	
H								or subordinates? Yes X No	
П	Application	on penaing	DAVE ELMOR, 4890 RIVERBEND RD, BOULDER, CO 80301 H(b) Are all st						
_	Tax-exec	npt status:							
J Website: ► N/A  H(c) Group exemption number									
								of legal domicile: CO	
	art I	Summa		abor _ Culer >	L real or lor	mation, 2007 in State or legal dominie.			
	_	Briefly describe the organization's mission or most significant activities: NAME SOUTH DESCRIPTION OF THE CLIEB CHARMITIS THE DET CONTROLLED							
Activities & Governance	١.	Differry dos	The state of the s						
	2	2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more						ite not accete	
		Number of voting members of the governing body (Part VI, line 1a)					. 3	9	
	1	Number of independent voting members of the governing body (Part VI, line 1b)				bl	. 4	9	
			umber of individuals employed in calendar year 2020 (Part V, line 2a)				. 5	4	
			al number of volunteers (estimate if necessary)					0	
		Total unrelated business revenue from Part VIII, column (C), line 12					. 6 . 7a	0.	
	1	Net unrelated business taxable income from Form 990-T, Part I, line 11					. 7b	0.	
Revenue	_							Current Year	
	8						44,727.	204,809.	
	1						85,064.	39,548.	
								-19,190.	
							-1,476. -1,296.	15,150.	
							27,019.	225,167.	
Expenses		Grants and similar amounts paid (Part IX, column (A), lines 1–3)							
		Benefits paid to or for members (Part IX, column (A), line 4)							
		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)					25,231.	156,217.	
		Professional fundraising fees (Part IX, column (A), line 11e)						1,400.	
	ь	Total fundr	aising expenses (Part IX, col	umn (D), line 25) ▶	42,215.			F:	
			enses (Part IX, column (A), lin			1	79,496.	112,141.	
	18	Total exper	nses. Add lines 13-17 (must	equal Part IX, column (A), lir	ne 25) .		04,727.	269,758.	
	19	Revenue le	ss expenses. Subtract line 1	8 from line 12			22,29244,		
Net Assets or und Balances			otal assets (Part X, line 16)			Beginning of		End of Year	
	20	Total asset				4:	54,043.	498,637.	
	21		abilities (Part X, line 26)					97,434.	
Ž	22	Net assets or fund balances. Subtract line 21 from line 20				4	45,797.	401,203.	
Part II Signature Block									
Und	der penalt	ties of perjury,	I declare that I have examined this representation of preparer (other than	return, including accompanying sch	edules and st	atements, and to	the best of r	ny knowledge and belief, it is	
	7, 0011001,	and complete	s. Deciaration of preparer (other trial)	officer) is based on an information of	or which prepa	arer nas any kno	wiedge.		
e:-		11/15/2021						021	
Sign Here		Signature of officer Date							
не	re	DAVE ELMORE, EXECUTIVE DIRECTOR							
		Type or print name and title							
Pai	id								
Preparei Use Only			I SIRAM AVANTI SIRAM 12/01/202					P02372858	
		Firm's name ► Ellis BLB Firm's						20-5405563	
		Firm's address > 729 Main Street, Longmont, CO 80501 Phone no S discuss this return with the preparer shown above? See instructions					hone no. (7	20)494-2552	
ıvıa١	the IK	o discuss t	riis return with the preparer s	snown above? See instruction	ons			. X Yes No	