

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y Form **990** (2019)

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

TO EMPOWER PEOPLE TO ACHIEVE INDEPENDENCE FROM HARMFUL ADDICTIVE SUBSTANCES OR ACTIVITIES THROUGH OUR 4-POINT PROGRAM, WHICH USES PRINCIPLES AND TOOLS FROM THE EVIDENCE-BASED COGNITIVE AND MOTIVATIONAL PSYCHOLOGIES MOST WIDELY USED IN ADDICTION TREATMENT, THESE INCLUDE COGNITIVE BEHAVIORAL THERAPY (CBT), RATIONAL-EMOTIVE BEHAVIORAL THERAPY (REBT), MOTIVATIONAL INTERVIEWING (MI) AND COMMUNITY REINFORCEMENT AND FAMILY TRAINING (CRAFT) SMART FAMILY & FRIENDS MEETINGS USE THE 4-POINT PROGRAM (FOR MANAGING EMOTIONAL UPSETS) AND CRAFT TECHNIQUES TO TEACH PARTICIPANTS HOW TO PRACTICE SELF-CARE TO MANAGE THE SIGNIFICANT STRESS FROM HAVING LOVED ONES WITH ADDICTION PROBLEMS ALSO, THEY LEARN NON-CONFRONTATIONAL AND COMPASSIONATE MEASURES TO HELP THEIR LOVED ONES SEEK TREATMENT SMART'S PROGRAMS AND ACTIVITIES ARE DRIVEN 1)TO HELP END INDIVIDUAL AND FAMILY SUFFERING CAUSED BY ADDICTION BY PROVIDING A SELF-EMPOWERING PROGRAM AND SUPPORT FROM A COMMUNITY OF THOUSANDS OF VOLUNTEERS SELF-MANAGEMENT

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 \$ 984,533 including grants of \$) (Revenue \$ 422,688)
See Additional Data

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

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

4e Total program service expenses 984,533

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)? If "Yes," complete Schedule A 	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
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? If "Yes," complete Schedule C, Part II	4	No
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? If "Yes," complete Schedule C, Part III	5	No
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? If "Yes," complete Schedule D, Part I 	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
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? If "Yes," complete Schedule D, Part IV 	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V 	10	No
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? If "Yes," complete Schedule D, Part VI 	11a Yes	
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? If "Yes," complete Schedule D, Part VII 	11b	No
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? If "Yes," complete Schedule D, Part VIII 	11c	No
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? If "Yes," complete Schedule D, Part IX 	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e	No
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)? If "Yes," complete Schedule D, Part X 	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
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? If "Yes," complete Schedule F, Parts I and IV	14b	No
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? If "Yes," complete Schedule F, Parts II and IV	15	No
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? If "Yes," complete Schedule F, Parts III and IV	16	No
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? If "Yes," complete Schedule G, Part I (see instructions)	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
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? If "Yes," complete Schedule I, Parts I and II	21	No

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? <i>If "Yes," complete Schedule I, Parts I and III</i>		No
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? <i>If "Yes," complete Schedule J</i>		No
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		No
24b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		No
25b	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? <i>If "Yes," complete Schedule L, Part I</i>		No
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? <i>If "Yes," complete Schedule L, Part II</i>		No
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? <i>If "Yes," complete Schedule L, Part III</i>		No
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)		
28a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		No
28b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		No
28c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
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? <i>If "Yes," complete Schedule R, Part I</i>		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		No
35b	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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		No
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? <i>If "Yes," complete Schedule R, Part VI</i>		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	Yes	

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		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	

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

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 10			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		2b	Yes	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		No
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O		3b		
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)?		4a		No
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?		5a		No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
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?		6a		No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
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?		7a		No
b If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		No
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?		7e		No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		No
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		No
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		No
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?		12a		
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? Note. See the instructions for additional information the organization must report on Schedule O		13a		
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		No
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in 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? If "Yes," see instructions and file Form 4720, Schedule N		15		No
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O		16		No

Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in 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	11	
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 in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent	11	
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?		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		No
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?		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	Yes	
b	Each committee with authority to act on behalf of the governing body?	Yes	
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 in Schedule O	Yes	

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?		No
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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Yes	
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	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?		No
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	Yes	
b	Other officers or key employees of the organization		No
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?		No
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?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed: **AK, AL, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, MA, MD, ME, MI, MN, MS, NC, ND, NH, NJ, NM, NV, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV**

18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (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 in Schedule O)

19 Describe in 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:
▶ MARK RUTH 7304 MENTOR AVE MENTOR, OH 440607524 (440) 951-5357

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See 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, or 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 dotted 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) MARK RUTH EXECUTIVE DI	40 00			X				81,777	0	4,629
(2) SHARI ALLWOOD FORMER EXEC	0 00			X				38,946	0	0
(3) WILLIAM J STEARNS JD DIRECTOR	10 00	X		X				0	0	0
(4) BRETT SAARELA LCSW VICE PRESIDE	10 00	X		X				0	0	0
(5) ROXANNE ALLEN DIRECTOR	2 00	X		X				0	0	0
(6) ELAINE APPEL DIRECTOR	2 00	X						0	0	0
(7) MICHELLE ELKINS DIRECTOR	2 00	X						0	0	0
(8) BILL GREER PRESIDENT	10 00	X		X				0	0	0
(9) RANDOLPH C LINDEL TREASURER	10 00	X		X				0	0	0
(10) ROB MCDONOUGH DIRECTOR	2 00	X						0	0	0
(11) JOSEPH GERSTEIN MD DIRECTOR	2 00	X						0	0	0
(12) THOMAS HORVATH PHD DIRECTOR	2 00	X						0	0	0
(13) TIMOTHY EDDY PHD 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 dotted 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			
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							120,723			4,629

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 ►

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
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? <i>If "Yes," complete Schedule J for such individual</i>		No
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

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
ACCUTRACK INC, 350 SONIC AVE LIVERMORE, CA 94551	BOOKS/OTHER	273,543
TRANSOM GROUP LLC, 1991 CROCKER ROAD WESTLAKE, OH 44145	IT SERVICES	165,780

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

Form 990 (2019)		Page 9			
Part VIII		Statement of Revenue			
Check 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	1a Federated campaigns	1a			
	b Membership dues	1b			
	c Fundraising events	1c			
	d Related organizations	1d			
	e Government grants (contributions)	1e	12,500		
	f All other contributions, gifts, grants, and similar amounts not included above	1f	498,218		
	g Noncash contributions included in lines 1a - 1f \$	1g			
	h Total. Add lines 1a-1f		510,718		
Program Service Revenue	2a DISTANCE TRAINING	Business Code	345,573	345,573	
	b CONFERENCE		68,871	68,871	
	c OTHER PROGRAM SERVICES		8,244	8,244	
	d				
	e				
	f All other program service revenue				
	g Total. Add lines 2a-2f		422,688		
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		943	
4 Income from investment of tax-exempt bond proceeds					
5 Royalties					
6a Gross rents		(i) Real (ii) Personal			
b Less rental expenses					
c Rental income or (loss)					
d Net rental income or (loss)					
7a Gross amount from sales of assets other than inventory		(i) Securities (ii) Other			
b Less cost or other basis and sales expenses					
c Gain or (loss)					
d Net gain or (loss)					
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18		8a			
b Less direct expenses		8b			
c Net income or (loss) from fundraising events					
9a Gross income from gaming activities See Part IV, line 19		9a			
b Less direct expenses		9b			
c Net income or (loss) from gaming activities					
10a Gross sales of inventory, less returns and allowances		10a	631,228		
b Less cost of goods sold		10b	324,561		
c Net income or (loss) from sales of inventory			306,667	306,667	
Miscellaneous Revenue	Business Code				
11a					
b					
c					
d All other revenue					
e Total. Add lines 11a-11d					
12 Total revenue. See instructions		1,241,016	729,355	943	

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.				
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.	94,498	47,294	23,647	23,557
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.	308,359	256,034	52,325	
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).				
9 Other employee benefits.	20,089	15,126	3,788	1,175
10 Payroll taxes.	34,660	26,102	6,536	2,022
11 Fees for services (non-employees):				
a Management.				
b Legal.	3,010		3,010	
c Accounting.	9,748		9,748	
d Lobbying.				
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 Schedule O).				
12 Advertising and promotion.	179,832	179,832		
13 Office expenses.	37,508	23,807	8,600	5,101
14 Information technology.				
15 Royalties.				
16 Occupancy.	37,980	33,732	2,604	1,644
17 Travel.	7,158	7,158		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	83,958	83,958		
20 Interest.	517	517		
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	29,067	29,067		
23 Insurance.	6,914	4,781	2,133	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a DISTANCE LEARNING	227,296	227,296		
b PAYMENT PROCESSING FEE	59,184		59,184	
c ONSITE TRAINING	44,766	44,766		
d FUNDRAISING	20,655			20,655
e All other expenses	12,633	5,063	7,570	
25 Total functional expenses. Add lines 1 through 24e.	1,217,832	984,533	179,145	54,154
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 IX ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	75,174	1	99,785
	2 Savings and temporary cash investments		2	25,383
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	18,480	4	31,220
	5 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		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	49,760	8	70,884
	9 Prepaid expenses and deferred charges	3,358	9	3,000
	10a Land, buildings, and equipment—cost or other basis—Complete Part VI of Schedule D	10a 18,417		
	b Less—accumulated depreciation	10b 1,035	10c	17,382
	11 Investments—publicly traded securities	189,980	11	224,885
	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		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	364,784	16	472,539	
Liabilities	17 Accounts payable and accrued expenses	193,515	17	236,025
	18 Grants payable		18	
	19 Deferred revenue	9,525	19	
	20 Tax-exempt bond liabilities		20	
	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		23	23,618
	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	1,397	25	
	26 Total liabilities. Add lines 17 through 25	204,437	26	259,643
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here ☒ and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	151,019	27	188,164
	28 Net assets with donor restrictions	9,328	28	24,732
	Organizations that do not follow FASB ASC 958, check here ☐ 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	160,347	32	212,896
33 Total liabilities and net assets/fund balances	364,784	33	472,539	

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	1,241,016
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,217,832
3	Revenue less expenses Subtract line 2 from line 1	3	23,184
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	160,347
5	Net unrealized gains (losses) on investments	5	29,365
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 in Schedule O)	9	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	212,896

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
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		No
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	Yes	
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 in Schedule O	Yes	
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?		No
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 in Schedule O and describe any steps taken to undergo such audits		

Additional Data

Software ID:
Software Version:
EIN: 52-1811500
Name: SMART RECOVERY USA INC

Form 990 (2019)

Form 990, Part III, Line 4a:

SMART RECOVERY IS THE LARGEST COMMUNITY THAT PROVIDES INDIVIDUALS AND FAMILIES WITH SELF-EMPOWERING AND SCIENCE-BASED SUPPORT-IN THE U S AND THE WORLD. IN 2019, WE COMPLETED A DECADE OF EXTENSIVE GROWTH IN WHICH WE HELPED COMMUNITIES ACROSS AMERICA ADDRESS AN EPIDEMIC OF ADDICTION AND DEATH ASSOCIATED WITH ALCOHOL AND DRUGS. THROUGH A SEVEN-FOLD INCREASE IN WEEKLY SUPPORT GROUP MEETINGS SINCE 2010, SMART USA EXTENDED ITS RECOVERY AND LIFE-SAVING SUPPORT TO WELL OVER HALF A MILLION PEOPLE PER YEAR. SMART HAS EMERGED AS A MAJOR FORCE IN THE MOVEMENT TO END THIS EPIDEMIC, SAVING LIVES FROM THE OPIOID EPIDEMIC. SMART'S GROWTH HAS ESPECIALLY SUPPORTED PEOPLE NEEDING THE GOLD-STANDARD OF CARE FOR OPIOID ADDICTION: PSYCHOSOCIAL AND COMMUNITY-BASED SUPPORT AND MEDICATION-ASSISTED TREATMENT (MAT). WITH MORE THAN 45,000 AMERICANS DYING FROM OPIOID OVERDOSES EACH YEAR, IT IS CRITICAL THAT THIS TREATMENT BE SOCIALLY ACCEPTABLE TO ENSURE A SAFE RECOVERY THAT MINIMIZES THE RISK OF FATAL OVERDOSES, WHICH MAT PROVIDES. MANY PEOPLE UNDERGOING MAT, HOWEVER, FIND THAT SOME RECOVERY PROGRAMS STIGMATIZE THEM AS NOT BEING "IN RECOVERY- OR "CLEAN." SMART PEER SUPPORT MEETINGS PROVIDE A WARM WELCOME AND SAFE, NON-JUDGMENTAL RECOVERY SUPPORT. AS PART OF OUR SCIENTIFIC FOUNDATION, SMART HAS ALWAYS WELCOMED ANYONE USING LEGALLY PRESCRIBED MEDICATIONS, WHETHER TO TREAT MENTAL HEALTH CONDITIONS OR SUPPORT RECOVERY. SMART 4-POINT PROGRAM AND THERAPEUTIC TOOLS SURVEYS OF VOLUNTEERS AND MEETING PARTICIPANTS SHOWED THEY ARE ATTRACTED BY THE PRACTICAL FRAMEWORK FOR ELIMINATING SELF-DESTRUCTIVE BEHAVIOR PROVIDED BY THE SMART RECOVERY 4-POINT PROGRAM. 1. BUILD AND MAINTAIN MOTIVATION TO OVERCOME ADDICTIVE AND OTHER PROBLEMATIC BEHAVIOR. 2. COPE WITH URGES TO PREVENT REGRESSING BACK TO HARMFUL BEHAVIOR. 3. MANAGE THOUGHTS, FEELINGS, AND BEHAVIORS TO PREVENT RELAPSES AND EXTREME EMOTIONAL UPSETS. 4. LEAD A BALANCED LIFE, REPLACING THE ONE ASSOCIATED WITH THE PROBLEMATIC BEHAVIOR. THIS CHANGE IS PARAMOUNT IN LONG-TERM RECOVERY FROM ADDICTION. MANY PARTICIPANTS SAID THEY BENEFITED FROM SMART RECOVERY TOOLS. FOR EXAMPLE, THE COST-BENEFIT-ANALYSIS (CBA) DEMONSTRATES HOW THE INSTANT GRATIFICATION FROM PROBLEM DRINKING OR DRUGGING IS FAR OUTWEIGHED BY THE LONG-TERM COSTS (FINANCIAL DISTRESS, FAILED RELATIONSHIPS, JOB LOSS, IMPRISONMENT, AND HEALTH PROBLEMS THAT CAN LEAD TO DEATH). SMART TOOLS SUCH AS THE CBA WORK WELL AS GROUP EXERCISES IN MEETINGS, AND PEOPLE OFTEN USE THEM ON THEIR OWN FOR A WIDE RANGE OF BEHAVIORAL PROBLEMS. MANY PEOPLE ALSO USE SMART MEETINGS TO ADDRESS OTHER LIFE CHALLENGES BECAUSE ITS SELF-EMPOWERING APPROACH AND TOOLS CAN BE APPLIED TO MANY BEHAVIORAL PROBLEMS. TRAINING MEETING FACILITATORS AND PROFESSIONALS VOLUNTEERS. IN 2019, SMART RECOVERY PROVIDED EXTENSIVE TRAINING FOR VOLUNTEERS WHO FACILITATE SUPPORT GROUP MEETINGS. APPROXIMATELY 3,000 PEOPLE REGISTERED FOR SMART USA'S RIGOROUS 20-HOUR VOLUNTEER FACILITATOR ONLINE TRAINING COURSE, WHICH TEACHES COGNITIVE PSYCHOLOGY CONCEPTS AND TOOLS WIDELY USED IN ADDICTION TREATMENT. THE TRAINING ALSO TEACHES ESSENTIAL MEETING MANAGEMENT SKILLS, INCLUDING MOTIVATIONAL INTERVIEWING, WHICH HAS BEEN PROVEN EFFECTIVE IN HELPING PEOPLE DECIDE FOR THEMSELVES TO STOP ADDICTIVE BEHAVIOR. SMART TRAINS FACILITATORS TO HELP PEOPLE FOCUS ON THE PRESENT AND FUTURE-WHAT THEY CAN DO NOW AND GOING FORWARD TO ADVANCE THEIR RECOVERY. IN THIS TRAINING, NEW VOLUNTEERS LEARN THAT LABELS SUCH AS "ADDICT," "ALCOHOLIC," "DRUNK," "JUNKIE,- AND WORSE CAN STIGMATIZE AND UNDERMINE THE MOTIVATION TO RECOVER. SMART DISCOURAGES THE USE OF LABELS WHILE FOCUSING ON ADDICTION AS A BEHAVIORAL PROBLEM THAT CAN BE CORRECTED. HEALTH CARE PROVIDERS. WE LAUNCHED A NEW PROFESSIONAL ONLINE TRAINING PROGRAM, DESIGNED FOR RECOVERY PROFESSIONALS. WE HAVE FOUND THERE IS A GROWING DEMAND AMONG ADDICTION RECOVERY PROFESSIONALS WHO WANT TO LEARN HOW SMART WORKS, SEEKING SELF-EMPOWERING TOOLS TO INCORPORATE INTO THEIR PRACTICE. MANY LAUNCH SMART MEETINGS FOR THEIR PATIENTS TO START THE PROCESS OF RECOVERY. CLIENTS CAN CONTINUE USING SMART COGNITIVE AND MOTIVATIONAL TOOLS AND ACCESS SMART PEER SUPPORT VIA LOCAL MEETINGS OR ONLINE MEETINGS FOR ONGOING SUPPORT ONCE TREATMENT HAS ENDED. THIS COURSE IS SUITABLE FOR MENTAL HEALTH PROFESSIONALS, INCLUDING PSYCHOLOGISTS, LICENSED COUNSELORS, SOCIAL WORKERS, PEER RECOVERY SPECIALISTS, AND STUDENTS ASPIRING TO WORK IN THE FIELD. ONSITE TRAINING FOR PROFESSIONALS. WE SAW A SHARP INCREASE IN REQUESTS FOR ONSITE TRAINING IN TREATMENT CENTERS AROUND THE COUNTRY IN 2019 TO TRAIN STAFF ON HOW TO INCORPORATE SMART MEETINGS INTO THEIR ONGOING TREATMENT OPTIONS, ONLINE IMPACT AND INNOVATION IN 2019, SMART USA'S ON-LINE COMMUNITY (SROL, SMARTRECOVERY.ORG/COMMUNITY/), CONTINUED TO GROW AND INNOVATE, AS IT HAS FOR MORE THAN TWO DECADES SINCE THE WORLD WIDE WEB WENT PUBLIC. IN 2019, SMART ADOPTED A VIDEO CONFERENCING PLATFORM FOR WEEKLY ONLINE MEETINGS, ALLOWING PARTICIPANTS TO INTERACT FACE-TO-FACE AS THEY DO AT A LOCAL COMMUNITY MEETING. THE INCREASE IN CAPACITY GAINED BY MOVING TO A MORE ROBUST MEETING PLATFORM, COMBINED WITH A 30% INCREASE IN THE NUMBER OF ONLINE MEETINGS, TRIPLED OUR WEEKLY PARTICIPATION TO MORE THAN 3,500 PEOPLE. OUR ONLINE COMMUNITY INCLUDES MEETINGS FOR FAMILY & FRIENDS, COUPLES, TEENS, MILITARY VETERANS, MENTAL HEALTH PROFESSIONALS, AND INDIVIDUALS WITH BEHAVIORAL PROBLEMS RELATED TO SEX AND EATING. SMART'S ONLINE COMMUNITY OFFERS MORE SPECIALIZED HELP THROUGH MESSAGE BOARDS FEATURING MYRIAD FORUMS FOR TOPICS INCLUDING EACH OF THE 4 POINTS, SMART TOOLS, DEALING WITH GRIEF DURING RECOVERY, PARENTHOOD, SELF-HARM, AND MENTAL HEALTH CONDITIONS, ALONG WITH ADDICTION TO GAMBLING, SEX, OPIATES, MARIJUANA, COCAINE, AND OTHER DRUGS. A SPECIAL GROUP FORUM IS DEVOTED TO HELPING PEOPLE STOP SMOKING. THE SMART ONLINE COMMUNITY PROVIDES 24/7/365 SUPPORT AND CONTINUES TO ATTRACT A GROWING NUMBER OF NEW USERS, TOTALING MORE THAN 1.3 MILLION IN 2019. OUR ONLINE MEETINGS ARE ACCESSIBLE TO ANYONE WORLDWIDE. THEY ARE ESPECIALLY APPRECIATED BY PEOPLE IN REMOTE AREAS AND THOSE WHO LACK TRANSPORTATION OR CANNOT LEAVE HOME DUE TO CHILDCARE/ELDERCARE RESPONSIBILITIES. SMART USA PUBLISHES TOP-RANKED ADDICTION BLOG. THE SMART RECOVERY BLOG IS A VALUABLE SOURCE OF INFORMATION AND INSPIRATION FOR PEOPLE SEEKING HELP, RANKING AS THE NUMBER ONE DRUG ADDICTION BLOG, ACCORDING TO INDEPENDENT ASSESSMENTS (HTTPS://BLOG.FEEDSPOT.COM/DRUG_ADDICTION_BLOGS/) THE WIDE-RANGING TOPICS COVERED INCLUDE "PRODUCTIVE WORRYING" FOR FAMILY MEMBERS, "BINGE DRINKING VS. HEAVY DRINKING," "MOTIVATIONAL INTERVIEWING," PERSONAL SUCCESS STORIES, AND PODCASTS BY LEADING PRACTITIONERS IN THE FIELD OF ADDICTION RECOVERY. MANY 2019 BLOGS PROFILED LONG-TIME SMART VOLUNTEERS, SHARING INSIGHTS INTO THEIR RECOVERY JOURNEYS AND HOW THEY HELP OTHERS. IN 2019, SMART ALSO CONSOLIDATED AND EXPANDED ITS MANY YOUTUBE PRESENTATIONS IN ONE LOCATION: WWW.YOUTUBE.COM/USER/SMARTRECOVERY. HERE, PEOPLE CAN VIEW IN-DEPTH PRESENTATIONS BY LEADING ADDICTION SCIENTISTS, ALONG WITH SHORT VIDEOS THAT INSTRUCT PEOPLE HOW TO USE SMART TOOLS. NEW RESOURCES FOR CORRECTIONAL FACILITIES. SMART USA INTRODUCED TWO NEW RESOURCES IN 2019 FOR INMATES IN CORRECTIONAL FACILITIES WHO NEED HELP RECOVERING FROM ADDICTIVE AND CRIMINAL BEHAVIOR. BOTH ARE INSTRUCTIONAL COURSES THAT UPDATE THE SMART INSIDEOUT PROGRAM THAT'S BEEN USED IN HUNDREDS OF FACILITIES WORLDWIDE SINCE IT WAS DEVELOPED TWO DECADES AGO. WITH 1 MILLION IN GRANTS FROM THE NATIONAL INSTITUTE ON DRUG ABUSE "LEARN INSIDEOUT FAST: A SHORT-TERM COURSE" CONDENSES THE PROGRAM TO 12-MEETINGS FOR JAILS WHERE PEOPLE SERVE SHORT SENTENCES OR AWAIT SENTENCING OR TRIALS. A COURSE FOR SUCCESSFUL LIFE SKILLS, INCLUDING SMART RECOVERY INSIDEOUT TOOLS, SHOWS HOW ANYONE CAN USE SMART IN A PRACTICAL AND HOLISTIC MANNER TO REBUILD THEIR LIVES, INCLUDING GUIDANCE ON SEEKING WORK, EARNING AND MANAGING MONEY, AND OTHER BASIC NEEDS. SILVER ANNIVERSARY OF SMART RECOVERY. SMART RECOVERY USA LED THE 2019 CELEBRATION OF THE ORGANIZATION'S SILVER ANNIVERSARY, GROWING FROM A FLEDGLING COMMUNITY WITH 42 MEETINGS IN THE U.S. TO A GLOBAL MOVEMENT WITH WELL OVER 3,000 MEETINGS IN MORE THAN 20 COUNTRIES. THE CELEBRATION SPOTLIGHTED THE THOUSANDS OF VOLUNTEERS WHO HELP PEOPLE RECOVER USING MEETINGS AND PROGRAM TOOLS, ALONG WITH THE PROFESSIONALS AND ADDICTION SCIENTISTS WHO DESIGNED AND CONTINUE TO UPDATE SMART WITH INNOVATIONS IN TREATMENT AND RECOVERY SUPPORT. THE CELEBRATION CULMINATED AT THE NATIONAL CONFERENCE IN CHICAGO, ATTENDED BY A RECORD 200 PEOPLE, AND LIVE-STREAMED HUNDREDS MORE WORLDWIDE. THE EVENT FEATURED HIGHLY INFORMATIVE KEYNOTE PRESENTATIONS BY RENOWNED SCIENTISTS AND POLICYMAKERS, INCLUDING - CARLO DI CLEMENTE, PH.D., PROFESSOR EMERITUS AT THE UNIVERSITY OF MARYLAND DEPARTMENT OF PSYCHOLOGY, CO-DEVELOPER OF THE TRANSTHEORETICAL MODEL OF BEHAVIOR CHANGE, DIRECTOR OF THE MDQUIT TOBACCO RESOURCE CENTER, AND DIRECTOR OF THE CENTER FOR COMMUNITY COLLABORATION.

SCHEDULE A

(Form 990 or 990EZ)

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

2019

Open to Public Inspection

Name of the organization
SMART RECOVERY USA INC

Employer identification number
52-1811500

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 **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						

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

Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2019

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 failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support							
Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")	134,974	225,698	287,975	331,533	510,718	1,490,898
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	134,974	225,698	287,975	331,533	510,718	1,490,898
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)						52,098
6	Public support. Subtract line 5 from line 4						1,438,800
Section B. Total Support							
Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4	134,974	225,698	287,975	331,533	510,718	1,490,898
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,208	2,350	3,871	5,261	943	14,633
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)	18,739	18,908	15,850	5,261	8,244	67,002
11	Total support. Add lines 7 through 10						1,572,533
12	Gross receipts from related activities, etc (see instructions)					12	2,554,241
13	First five 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 2019 (line 6, column (f) divided by line 11, column (f))					14	91 500 %
15	Public support percentage for 2018 Schedule A, Part II, line 14					15	90 900 %
16a	33 1/3% support test—2019. 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 ▶ ☒						
b	33 1/3% support test—2018. 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 ▶ ☐						
17a	10%-facts-and-circumstances test—2019. 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 ▶ ☐						
b	10%-facts-and-circumstances test—2018. 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 ▶ ☐						
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 ▶ ☐						

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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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 five 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 2019 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2019. 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—2018. 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 on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of 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>	1	
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>	2	
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>	3a	
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>	3b	
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>	3c	
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>	4a	
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>	4b	
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>	4c	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) 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>	5a	
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?	5b	
c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	
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>	6	
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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>	7	
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>	8	
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>	9a	
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>	9b	
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>	9c	
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>	10a	
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>	10b	

Part IV Supporting Organizations (continued)		Yes	No
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 (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI		

Section B. Type I Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's 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 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		

Section C. Type II Supporting Organizations		Yes	No
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)		

Section D. All Type III Supporting Organizations		Yes	No
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 (2), 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		

Section E. Type III Functionally-Integrated Supporting Organizations		Yes	No
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 government entity (see instructions)		
2	Activities Test. Answer (a) and (b) 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 (a) 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 (a) and (b) 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? 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		

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)	1		
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 (explain in detail in Part VI)			
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 1-1/2% 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 .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 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** ☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2019			
a From 2014.			
b From 2015.			
c From 2016.			
d From 2017.			
e From 2018.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2019 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2019, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2019 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2020. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2015.			
b Excess from 2016.			
c Excess from 2017.			
d Excess from 2018.			
e Excess from 2019.			

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)

Facts And Circumstances Test

990 Schedule A, Supplemental Information

Return Reference	Explanation
PART II, LINE 10	67,002

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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

2019

Open to Public Inspection

Name of the organization
SMART RECOVERY USA INC

Employer identification number
52-1811500

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.

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

(a)

Donor advised funds

(b)

Funds and other accounts

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?

☐ Yes

☐ 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?

☐ Yes

☐ 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)

☐ Preservation of land for public use (e g , recreation or education)

☐ Preservation of an historically important land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ 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 Year

2a

2b

2c

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 SFAS 116 (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 SFAS 116 (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 SFAS 116 (ASC 958) relating to these items

a

Revenue included on Form 990, Part VIII, line 1

► \$

b

Assets included in Form 990, Part X

► \$

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

Cat No 52283D

Schedule D (Form 990) 2019

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 are a significant use of its collection items (check all that apply)

- a** ☐ Public exhibition
- b** ☐ Scholarly research
- c** ☐ Preservation for future generations
- d** ☐ Loan or exchange programs
- e** ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII**5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ **Yes** ☐ **No****Part IV Escrow and Custodial Arrangements.**

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ **Yes** ☐ **No****b** If "Yes," explain the arrangement in Part XIII and complete the following table**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 in Part XIII ☐**Part V Endowment Funds.**

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

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

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as**a** Board designated or quasi-endowment ▶**b** Permanent endowment ▶**c** Temporarily restricted 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**b** If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

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

4 Describe in Part XIII the intended uses of the organization's endowment funds**Part VI Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶

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. (Column (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. (Column (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)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☒

Schedule D (Form 990) 2019

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	1,629,847
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	29,365
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	359,466
e	Add lines 2a through 2d	2e	388,831
3	Subtract line 2e from line 1	3	1,241,016
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	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	1,241,016

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	1,577,298
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	359,466
e	Add lines 2a through 2d	2e	359,466
3	Subtract line 2e from line 1	3	1,217,832
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	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	1,217,832

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.

Return Reference	Explanation
See Additional Data Table	

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

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 52-1811500
Name: SMART RECOVERY USA INC

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PAGE 3, PART X	THE ORGANIZATION IS INCORPORATED AS A NOT-FOR-PROFIT THAT IS EXEMPT FROM FEDERAL INCOME TAXES UNDER INTERNAL REVENUE CODE SECTION 501(C)(3) AND IS NOT CONSIDERED A PRIVATE FOUNDATION UNDER SECTION 509(A)(1) THE ORGANIZATION CURRENTLY HAS NO UNRELATED BUSINESS INCOME ACCORDINGLY, NO PROVISION FOR INCOME TAXES HAS BEEN RECORDED THE ORGANIZATION'S POLICY IS TO RECORD A LIABILITY FOR ANY TAX POSITION TAKEN THAT IS BENEFICIAL TO THE ORGANIZATION, INCLUDING PENALTIES AND INTEREST, WHEN IT IS MORE LIKELY THAN NOT THE POSITION TAKEN WILL BE OVERTURNED BY A TAXING AUTHORITY UPON EXAMINATION MANAGEMENT BELIEVES THERE ARE NO SUCH POSITIONS AS OF DECEMBER 31, 2019 AND, ACCORDINGLY, NO LIABILITY HAS BEEN ACCRUED

Supplemental Information	
Return Reference	Explanation
SCHEDULE D, PAGE 4, PART XI, LINE 2D	COGS IS EXP ON FINANCIALS 359,466

Supplemental Information	
Return Reference	Explanation
SCHEDULE D, PAGE 4, PART XII, LINE 2D	COGS IS EXP ON FINANCIALS 359,466

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization
SMART RECOVERY USA INC

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

2019

**Open to Public
Inspection**

Employer identification number

52-1811500

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 - ORGANIZATION'S MISSION	TO EMPOWER PEOPLE TO ACHIEVE INDEPENDENCE FROM HARMFUL ADDICTIVE SUBSTANCES OR ACTIVITIES THROUGH OUR 4-POINT PROGRAM, WHICH USES PRINCIPLES AND TOOLS FROM THE EVIDENCE-BASED COGNITIVE AND MOTIVATIONAL PSYCHOLOGIES MOST WIDELY USED IN ADDICTION TREATMENT, THESE INCLUDE COGNITIVE BEHAVIORAL THERAPY (CBT), RATIONAL-EMOTIVE BEHAVIORAL THERAPY (REBT), MOTIVATIONAL INTERVIEWING (MI) AND COMMUNITY REINFORCEMENT AND FAMILY TRAINING (CRAFT) SMART FAMILY & FRIENDS MEETINGS USE THE 4-POINT PROGRAM (FOR MANAGING EMOTIONAL UPSETS) AND CRAFT TECHNIQUES TO TEACH PARTICIPANTS HOW TO PRACTICE SELF-CARE TO MANAGE THE SIGNIFICANT STRESS FROM HAVING LOVED ONES WITH ADDICTION PROBLEMS ALSO, THEY LEARN NON-CONFRONTATIONAL AND COMPASSIONATE MEASURES TO HELP THEIR LOVED ONES SEEK TREATMENT SMART'S PROGRAMS AND ACTIVITIES ARE DRIVEN 1)TO HELP END INDIVIDUAL AND FAMILY SUFFERING CAUSED BY ADDICTION BY PROVIDING A SELF-EMPOWERING PROGRAM AND SUPPORT FROM A COMMUNITY OF THOUSANDS OF VOLUNTEERS SELF-MANAGEMENT AND RECOVERY TRAINING, OR SMART, HOSTS FREE WEEKLY SUPPORT MEETINGS, IN-PERSON AND ONLINE, WHERE PEOPLE HELP EACH OTHER FIND THE POWER WITHIN THEMSELVES TO BUILD NEW LIVES FREE FROM ADDICTION AND UNHEALTHY BEHAVIOR AND EMOTIONS THAT DESTROY INDIVIDUALS AND FAMILIES SMART USES PRINCIPLES AND PRACTICES FROM COGNITIVE AND MOTIVATIONAL PSYCHOLOGY THAT IS WIDELY USED IN ADDICTION TREATMENT SMART HOLDS MEETINGS IN WELL OVER 20 COUNTRIES SMART RECOVERY USA OVERSEES MORE THAN 2,000 MEETINGS, COMPRISING TWO-THIRDS OF THE GLOBAL COMMUNITY 2)TO TRAIN VOLUNTEERS HOW TO FACILITATE SUPPORT GROUP MEETINGS FOR INDIVIDUALS WORKING TO RECOVER FROM ADDICTION AND FOR FAMILY MEMBERS AND FRIENDS STRUGGLING TO CARE FOR LOVED ONES WHO NEED HELP TO LEAD MEETINGS, OUR VOLUNTEERS LEARN HOW TO ENCOURAGE STIGMA-FREE DISCUSSION CENTERED AROUND SMART'S PROPRIETARY 4-POINT PROGRAM-FROM FINDING THE MOTIVATION TO STOP ADDICTIVE BEHAVIOR TO LEADING A BALANCED AND FULFILLING LIFE SMART WORKS AS A PARTNERSHIP BETWEEN PROFESSIONALS, PEERS, AND NON-PEERS, COMBINING THE BEST SCIENCE USED FOR TREATMENT WITH THE PRACTICAL LIVED EXPERIENCE OF THOSE WHO HAVE RECOVERED AND OTHERS WHO WANT TO HELP

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 2, PART III, LINE 4A	SMART RECOVERY IS THE LARGEST COMMUNITY THAT PROVIDES INDIVIDUALS AND FAMILIES WITH SELF-EMPOWERING AND SCIENCE-BASED SUPPORT- IN THE U S AND THE WORLD IN 2019, WE COMPLETED A DECADE OF EXTENSIVE GROWTH IN WHICH WE HELPED COMMUNITIES ACROSS AMERICA ADDRESS AN EPIDEMIC OF ADDICTION AND DEATH ASSOCIATED WITH ALCOHOL AND DRUGS THROUGH A SEVEN-FOLD INCREASE IN WEEKLY SUPPORT GROUP MEETINGS SINCE 2010, SMART USA EXTENDED ITS RECOVERY AND LIFE-SAVING SUPPORT TO WELL OVER HALF A MILLION PEOPLE PER YEAR SMART HAS EMERGED AS A MAJOR FORCE IN THE MOVEMENT TO END THIS EPIDEMIC SAVING LIVES FROM THE OPIOID EPIDEMIC SMART'S GROWTH HAS ESPECIALLY SUPPORTED PEOPLE NEEDING THE GOLD-STANDARD OF CARE FOR OPIOID ADDICTION PSYCHOSOCIAL AND COMMUNITY-BASED SUPPORT AND MEDICATION-ASSISTED TREATMENT (MAT) WITH MORE THAN 45,000 AMERICANS DYING FROM OPIOID OVERDOSES EACH YEAR, IT IS CRITICAL THAT THIS TREATMENT BE SOCIALLY ACCEPTABLE TO ENSURE A SAFE RECOVERY THAT MINIMIZES THE RISK OF FATAL OVERDOSES, WHICH MAT PROVIDES MANY PEOPLE UNDERGOING MAT, HOWEVER, FIND THAT SOME RECOVERY PROGRAMS STIGMATIZE THEM AS NOT BEING "IN RECOVERY- OR "CLEAN " SMART PEER SUPPORT MEETINGS PROVIDE A WARM WELCOME AND SAFE, NON-JUDGMENTAL RECOVERY SUPPORT AS PART OF OUR SCIENTIFIC FOUNDATION, SMART HAS ALWAYS WELCOMED ANYONE USING LEGALLY PRESCRIBED MEDICATIONS, WHETHER TO TREAT MENTAL HEALTH CONDITIONS OR SUPPORT RECOVERY SMART 4-POINT PROGRAM AND THERAPEUTIC TOOLS SURVEYS OF VOLUNTEERS AND MEETING PARTICIPANTS SHOWED THEY ARE ATTRACTED BY THE PRACTICAL FRAMEWORK FOR ELIMINATING SELF-DESTRUCTIVE BEHAVIOR PROVIDED BY THE SMART RECOVERY 4-POINT PROGRAM 1 BUILD AND MAINTAIN MOTIVATION TO OVERCOME ADDICTIVE AND OTHER PROBLEMATIC BEHAVIOR 2 COPE WITH URGES TO PREVENT REGRESSING BACK TO HARMFUL BEHAVIOR 3 MANAGE THOUGHTS, FEELINGS, AND BEHAVIORS TO PREVENT RELAPSES AND EXTREME EMOTIONAL UPSETS 4 LEAD A BALANCED LIFE, REPLACING THE ONE ASSOCIATED WITH THE PROBLEMATIC BEHAVIOR THIS CHANGE IS PARAMOUNT IN LONG-TERM RECOVERY FROM ADDICTION MANY PARTICIPANTS SAID THEY BENEFITED FROM SMART RECOVERY TOOLS FOR EXAMPLE, THE COST-BENEFIT-ANALYSIS (CBA) DEMONSTRATES HOW THE INSTANT GRATIFICATION FROM PROBLEM DRINKING OR DRUGGING IS FAR OUTWEIGHED BY THE LONG-TERM COSTS (FINANCIAL DISTRESS, FAILED RELATIONSHIPS, JOB LOSS, IMPRISONMENT, AND HEALTH PROBLEMS THAT CAN LEAD TO DEATH) SMART TOOLS SUCH AS THE CBA WORK WELL AS GROUP EXERCISES IN MEETINGS, AND PEOPLE OFTEN USE THEM ON THEIR OWN FOR A WIDE RANGE OF BEHAVIORAL PROBLEMS MANY PEOPLE ALSO USE SMART MEETINGS TO ADDRESS OTHER LIFE CHALLENGES BECAUSE ITS SELF-EMPOWERING APPROACH AND TOOLS CAN BE APPLIED TO MANY BEHAVIORAL PROBLEMS TRAINING MEETING FACILITATORS AND PROFESSIONALS VOLUNTEERS IN 2019, SMART RECOVERY PROVIDED EXTENSIVE TRAINING FOR VOLUNTEERS WHO FACILITATE SUPPORT GROUP MEETINGS APPROXIMATELY 3,000 PEOPLE REGISTERED FOR SMART USA'S RIGOROUS 20-HOUR VOLUNTEER FACILITATOR ONLINE TRAINING COURSE, WHICH TEACHES COGNITIVE PSYCHOLOGY

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 2, PART III, LINE 4A	OGY CONCEPTS AND TOOLS WIDELY USED IN ADDICTION TREATMENT THE TRAINING ALSO TEACHES ESSEN TIAL MEETING MANAGEMENT SKILLS, INCLUDING MOTIVATIONAL INTERVIEWING, WHICH HAS BEEN PROVEN EFFECTIVE IN HELPING PEOPLE DECIDE FOR THEMSELVES TO STOP ADDICTIVE BEHAVIOR SMART TRAIN S FACILITATORS TO HELP PEOPLE FOCUS ON THE PRESENT AND FUTURE-WHAT THEY CAN DO NOW AND GOING FORWARD TO ADVANCE THEIR RECOVERY IN THIS TRAINING, NEW VOLUNTEERS LEARN THAT LABELS S UCH AS "ADDICT," "ALCOHOLIC," "DRUNK," "JUNKIE,- AND WORSE CAN STIGMATIZE AND UNDERMINE TH E MOTIVATION TO RECOVER SMART DISCOURAGES THE USE OF LABELS WHILE FOCUSING ON ADDICTION A S A BEHAVIORAL PROBLEM THAT CAN BE CORRECTED HEALTH CARE PROVIDERS WE LAUNCHED A NEW PRO FFESSIONAL ONLINE TRAINING PROGRAM, DESIGNED FOR RECOVERY PROFESSIONALS WE HAVE FOUND THER E IS A GROWING DEMAND AMONG ADDICTION RECOVERY PROFESSIONALS WHO WANT TO LEARN HOW SMART W ORKS, SEEKING SELF-EMPOWERING TOOLS TO INCORPORATE INTO THEIR PRACTICE MANY LAUNCH SMART MEETINGS FOR THEIR PATIENTS TO START THE PROCESS OF RECOVERY CLIENTS CAN CONTINUE USING S MART COGNITIVE AND MOTIVATIONAL TOOLS AND ACCESS SMART PEER SUPPORT VIA LOCAL MEETINGS OR ONLINE MEETINGS FOR ONGOING SUPPORT ONCE TREATMENT HAS ENDED THIS COURSE IS SUITABLE FOR MENTAL HEALTH PROFESSIONALS, INCLUDING PSYCHOLOGISTS, LICENSED COUNSELORS, SOCIAL WORKERS, PEER RECOVERY SPECIALISTS, AND STUDENTS ASPIRING TO WORK IN THE FIELD ONSITE TRAINING FO R PROFESSIONALS WE SAW A SHARP INCREASE IN REQUESTS FOR ONSITE TRAINING IN TREATMENT CENT ERS AROUND THE COUNTRY IN 2019 TO TRAIN STAFF ON HOW TO INCORPORATE SMART MEETINGS INTO TH EIR ONGOING TREATMENT OPTIONS, ONLINE IMPACT AND INNOVATION IN 2019, SMART USA'S ON-LINE C OMMUNITY (SROL, SMARTRECOVERY ORG/COMMUNITY/), CONTINUED TO GROW AND INNOVATE, AS IT HAS F OR MORE THAN TWO DECADES SINCE THE WORLD WIDE WEB WENT PUBLIC IN 2019, SMART ADOPTED A VI DEO CONFERENCING PLATFORM FOR WEEKLY ONLINE MEETINGS, ALLOWING PARTICIPANTS TO INTERACT FA CE-TO-FACE AS THEY DO AT A LOCAL COMMUNITY MEETING THE INCREASE IN CAPACITY GAINED BY MOV ING TO A MORE ROBUST MEETING PLATFORM, COMBINED WITH A 30% INCREASE IN THE NUMBER OF ONLIN E MEETINGS, TRIPLED OUR WEEKLY PARTICIPATION TO MORE THAN 3,500 PEOPLE OUR ONLINE COMMUNI TY INCLUDES MEETINGS FOR FAMILY & FRIENDS, COUPLES, TEENS, MILITARY VETERANS, MENTAL HEALT H PROFESSIONALS, AND INDIVIDUALS WITH BEHAVIORAL PROBLEMS RELATED TO SEX AND EATING SMART 'S ONLINE COMMUNITY OFFERS MORE SPECIALIZED HELP THROUGH MESSAGE BOARDS FEATURING MYRIAD F ORUMS FOR TOPICS INCLUDING EACH OF THE 4 POINTS, SMART TOOLS, DEALING WITH GRIEF DURING RE COVERY, PARENTHOOD, SELF-HARM, AND MENTAL HEALTH CONDITIONS, ALONG WITH ADDICTION TO GAMBL ING, SEX, OPIATES, MARIJUANA, COCAINE, AND OTHER DRUGS A SPECIAL GROUP FORUM IS DEVOTED T O HELPING PEOPLE STOP SMOKING THE SMART ONLINE COMMUNITY PROVIDES 24/7/365 SUPPORT AND CO NTINUES TO ATTRACT A GROWING NUMBER OF NEW USERS, TOTALING MORE THAN 1 3 MILLION IN 2019 OUR ONLINE MEETINGS ARE ACCESS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 2, PART III, LINE 4A	IBLE TO ANYONE WORLDWIDE THEY ARE ESPECIALLY APPRECIATED BY PEOPLE IN REMOTE AREAS AND TH OSE WHO LACK TRANSPORTATION OR CANNOT LEAVE HOME DUE TO CHILDCARE/ELDERCARE RESPONSIBILITIES SMART USA PUBLISHES TOP-RANKED ADDICTION BLOG THE SMART RECOVERY BLOG IS A VALUABLE SOURCE OF INFORMATION AND INSPIRATION FOR PEOPLE SEEKING HELP, RANKING AS THE NUMBER ONE DRUG ADDICTION BLOG, ACCORDING TO INDEPENDENT ASSESSMENTS (HTTPS //BLOG FEEDSPOT COM/DRUG_ADD ICTION_BLOGS/) THE WIDE-RANGING TOPICS COVERED INCLUDE "PRODUCTIVE WORRYING" FOR FAMILY MEMBERS, "BINGE DRINKING VS. HEAVY DRINKING," "MOTIVATIONAL INTERVIEWING," PERSONAL SUCCESS STORIES, AND PODCASTS BY LEADING PRACTITIONERS IN THE FIELD OF ADDICTION RECOVERY MANY 2 019 BLOGS PROFILED LONG-TIME SMART VOLUNTEERS, SHARING INSIGHTS INTO THEIR RECOVERY JOURNEYS AND HOW THEY HELP OTHERS IN 2019, SMART ALSO CONSOLIDATED AND EXPANDED ITS MANY YOUTUBE PRESENTATIONS IN ONE LOCATION WWW.YOUTUBE.COM/USER/SMARTRECOVERY HERE, PEOPLE CAN VIEW IN-DEPTH PRESENTATIONS BY LEADING ADDICTION SCIENTISTS, ALONG WITH SHORT VIDEOS THAT INSTRUCT PEOPLE HOW TO USE SMART TOOLS NEW RESOURCES FOR CORRECTIONAL FACILITIES SMART USA INTRODUCED TWO NEW RESOURCES IN 2019 FOR INMATES IN CORRECTIONAL FACILITIES WHO NEED HELP RECOVERING FROM ADDICTIVE AND CRIMINAL BEHAVIOR BOTH ARE INSTRUCTIONAL COURSES THAT UPDATE THE SMART INSIDEOUT PROGRAM THAT'S BEEN USED IN HUNDREDS OF FACILITIES WORLDWIDE SINCE IT WAS DEVELOPED TWO DECADES AGO WITH 1 MILLION IN GRANTS FROM THE NATIONAL INSTITUTE ON DRUG ABUSE "LEARN INSIDEOUT FAST A SHORT-TERM COURSE" CONDENSES THE PROGRAM TO 12-MEETINGS FOR JAILS WHERE PEOPLE SERVE SHORT SENTENCES OR AWAIT SENTENCING OR TRIALS A COURSE FOR SUCCESSFUL LIFE SKILLS, INCLUDING SMART RECOVERY INSIDEOUT TOOLS, SHOWS HOW ANYONE CAN USE SMART IN A PRACTICAL AND HOLISTIC MANNER TO REBUILD THEIR LIVES, INCLUDING GUIDANCE ON SEEKING WORK, EARNING AND MANAGING MONEY, AND OTHER BASIC NEEDS SILVER ANNIVERSARY OF SMART RECOVERY SMART RECOVERY USA LED THE 2019 CELEBRATION OF THE ORGANIZATION'S SILVER ANNIVERSARY, GROWING FROM A FLEDGLING COMMUNITY WITH 42 MEETINGS IN THE U.S. TO A GLOBAL MOVEMENT WITH WELL OVER 3,000 MEETINGS IN MORE THAN 20 COUNTRIES THE CELEBRATION SPOTLIGHTED THE THOUSANDS OF VOLUNTEERS WHO HELP PEOPLE RECOVER USING MEETINGS AND PROGRAM TOOLS, ALONG WITH THE PROFESSIONALS AND ADDICTION SCIENTISTS WHO DESIGNED AND CONTINUE TO UPDATE SMART WITH INNOVATIONS IN TREATMENT AND RECOVERY SUPPORT THE CELEBRATION CULMINATED AT THE NATIONAL CONFERENCE IN CHICAGO, ATTENDED BY A RECORD 200 PEOPLE, AND LIVE-STREAMED HUNDREDS MORE WORLDWIDE THE EVENT FEATURED HIGHLY INFORMATIVE KEYNOTE PRESENTATIONS BY RENOWNED SCIENTISTS AND POLICYMAKERS, INCLUDING - CARLO DI CLEMENTE, PH.D., PROFESSOR EMERITUS AT THE UNIVERSITY OF MARYLAND DEPARTMENT OF PSYCHOLOGY, CO-DEVELOPER OF THE TRANSTHEORETICAL MODEL OF BEHAVIOR CHANGE, DIRECTOR OF THE MDQUIT TOBACCO RESOURCE CENTER, AND DIRECTOR OF THE CENTER FOR COMMUNITY COLLABORATION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 9	WILLIAM J STEARNS, JD 7304 MENTOR AVE MENTOR, OH 44060 SHARI ALLWOOD 7304 MENTOR AVE MENTOR, OH 44060

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 11B	PRIOR TO FILING, THE FORM 990 IS PRESENTED TO THE EXECUTIVE DIRECTOR AND FINANCE COMMITTEE FOR REVIEW AND APPROVAL THE FORM 990 IS THEN ELECTRONICALLY DISTRIBUTED TO THE BOARD OF DIRECTORS FOR REVIEW IN ADVANCE OF FILING AN INDEPENDENT BOARD OFFICER SIGNS THE 8879-EO AND THE 990 IS THEN ELECTRONICALLY FILED

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 12C	EACH YEAR, THE BOARD MEMBERS ARE ASKED TO REVIEW THE ORGANIZATION'S CONFLICT OF INTEREST POLICY AMONG OTHER THINGS, THE POLICY MAKES CLEAR THAT ALL DECISIONS OF THE BOARD, OFFICERS, AND EMPLOYEES OF THE ORGANIZATION ARE MADE SOLELY ON THE BASIS OF A DESIRE TO PROMOTE THE BEST INTEREST OF THE ORGANIZATION AND THE PUBLIC GOOD THE CONFLICT OF INTEREST STATEMENT REQUESTS BOARD MEMBERS TO IDENTIFY TO THE BEST OF THEIR KNOWLEDGE AFFILIATIONS WITH ORGANIZATIONS THAT MAY BE POTENTIALLY RELATED TO THE FINANCIALS OR OTHER SUBSTANTIVE OPERATIONS OF THE ORGANIZATION THEY ARE ALSO ASKED TO IDENTIFY CIRCUMSTANCES INVOLVING EITHER THEMSELVES, OR A MEMBER OF THEIR EXTENDED FAMILY, THAT MAY BE CONSTRUED AS A CONFLICT OF INTEREST AT THE STAFF LEVEL, THE ORGANIZATION'S PERSONNEL ALSO ENSURE THAT THERE ARE NO CONFLICTS OF INTEREST WHEN CONSIDERING THE ENGAGEMENT OF A NEW VENDOR IF A POTENTIAL CONFLICT IS IDENTIFIED, APPROPRIATE STEPS ARE TAKEN TO BOTH ASSESS THE NATURE OF THE POTENTIAL CONFLICT AND, SUBSEQUENTLY, TO ENSURE THAT THE POSSIBILITY OF AN ACTUAL CONFLICT IS MITIGATED SUCH MITIGATION IS MANAGED AND THE LETTER AND SPIRIT OF THE CONFLICTS POLICY ARE UPHELD

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 15A	THE EXECUTIVE COMMITTEE ANNUALLY EVALUATES THE PERFORMANCE OF THE EXECUTIVE DIRECTOR. COMPENSATION IS BASED ON PERFORMANCE AND COMPARED TO OTHER AREA MISSION-COMPARABLE ORGANIZATIONS OF SIMILAR SIZE. COMPENSATION FOR STAFF WITHIN THE ORGANIZATION IS DETERMINED BY THE EXECUTIVE DIRECTOR. THE LEVEL OF COMPENSATION IS SET BASED ON PERFORMANCE AND IN RELATION TO OTHER AREA MISSION-COMPARABLE ORGANIZATIONS OF SIMILAR SIZE. THIS COMPENSATION IS A COMPONENT OF THE BUDGET, WHICH IS REVIEWED AND APPROVED BY THE FINANCE COMMITTEE AND ALSO BY THE BOARD AS A WHOLE.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 17	MASSACHUSETTS, MARYLAND, MAINE, MICHIGAN, MINNESOTA, MISSISSIPPI, NORTH CAROLINA, NORTH DAKOTA, NEW HAMPSHIRE, NEW JERSEY, NEW MEXICO, NEVADA, OHIO, OKLAHOMA, OREGON, PENNSYLVANIA, RHODE ISLAND, SOUTH CAROLINA, TENNESSEE, UTAH, VIRGINIA, WASHINGTON, WISCONSIN, WEST VIRGINIA

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 19	THE ORGANIZATION'S GOVERNING DOCUMENTS, FORM 1023, FORM 990 CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST THE FORM 990, WITHOUT SCHEDULE B) CAN ALSO BE FOUND ON SEVERAL PUBLICLY-ACCESSIBLE WEBSITES

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	COGS IS EXP ON FINANCIALS 359,466 COGS IS EXP ON FINANCIALS -359,466