TAXABLE YEAR

California Exempt Organization Annual Information Return

FORM	
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2020) Annual Information Ret	urn					199)
	r 2020 or fiscal year beginning (mm/dd/yyyy) <u>07/01/2020</u>		, and endi					
Corporation/Organization name California							er	
_	eles Robotics			3103	<u> 255 </u>			
	ormation. See instructions.			FEIN	-7050			
	er: LeRoy E Nelson ss (suite or room)			20-05	57253	PMB no.		
1457 3rd	· · · · · · · · · · · · · · · · · · ·					T WID TIO.		
City	Sileet				State	Zip code		
Manhatta	an Beach				CA	90266		
Foreign coun		n province/state/o	county		<u> </u>	Foreign po	stal code	
	rn		id the organization I	nave any chang	ges to its	s guideline	s	
	return●□Ye	03 🗀 140 💂 14	ot reported to the FT	B? See instruc	ctions		● L Yes	₩ No
C IRC Section	on 4947(a)(1) trust	es 🛂 No 💆 🗓	exempt under R&T ngaged in political a	ctivities? See i	nstructi	ine organ ons	ızatıon ● □ Yes	✓ No
● ☐ Dis	rmation return? ssolved	. , K Is	the organization ex "Yes," enter the gro	empt under Ra	&TC Sec	tion 2370	1g? ● 🗆 Yes	
	e: (mm/dd/yyyy) • / /	I Is		•				✓ No
Enter date: (mm/dd/yyyy) ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓								
(4) 🗹 Oth	(4) Other 990 series Solution (4) Yes No							
	ganization in a group exemption							
If "Yes," v	what is the parent's name?	D D	ate filed with IRS _					
Part I Co	mplete Part I unless not required to file this form. See G	eneral Informa	tion B and C					
	1 Gross sales or receipts from other sources. From Side					1	11 16	69 00
	2 Gross dues and assessments from members and affilia	ates				2	,	0 00
	3 Gross contributions, gifts, grants, and similar amounts						28	30 00
Receipts	4 Total gross receipts for filing requirement test. Add line	1 through line	3.					10.
and Revenues	This line must be completed. If the result is less than			3			11,44	49 00
Hevenues	5 Cost of goods sold		5		0 0			
	6 Cost or other basis, and sales expenses of assets sold				, ,			0 00
	7 Total costs. Add line 5 and line 6					<u> </u>	11.44	49 00
F	9 Total expenses and disbursements. From Side 2, Part II							39 00
Expenses	10 Excess of receipts over expenses and disbursements. S							90 00
	11 Total payments					11		0 00
1	12 Use tax. See General Information K					12		0 00
	13 Payments balance. If line 11 is more than line 12, subtr	ract line 12 fron	n line 11		•	13		0 00
	14 Use tax balance. If line 12 is more than line 11, subtrac	t line 11 from li	ine 12			14		0 00
	Penalties and Interest. See General Information J					15		0 00
	16 Balance due. Add line 12 and line 15. Then subtract lin Under penalties of perjury, I declare that I have examined this retur	1e 11 from the i	manying schedules an	d statements, an	d to the b	16 pest of my kn	nowledge and belie	0 00
Sign	true, correct, and complete. Declaration of preparer (other than tax	payer) is based or	all information of whic	h preparer has a	ny knowle	edge.	-	1, 10
Here	Title Date					Telephone		
	Signature of officer ▶	Treasurer				(310) 93	7-7226	
	Preparer's		Date	Check if self-	•	PTIN		
D. 1.1	signature >			employed ▶ ☐				
Paid Preparer's	Firm's name (or yours,					Firm's FE	IN	
Use Only	if self-employed) and address					A Talacha ca		
	und dddicoo					Telephone	;	
	May the FTB discuss this return with the preparer shown above? See instructions					. ● ☐ Yes ☐ No		

Part II Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts — complete Part II or furnish substitute information.

		1	Gross sales or receipts from all business ac	tivities. See instructions			00			
		2	Interest		00					
Rec	eipts	3	Dividends		00					
fron	-	4	Gross rents				00			
Oth		1	Gross royalties		00					
Sources 6 Gross amount received from sale of assets (00				
			Other income. Attach schedule		00					
		8	Total gross sales or receipts from other source	, Part I, line 1 8	00					
			Contributions, gifts, grants, and similar amo				00			
			Disbursements to or for members							
			Compensation of officers, directors, and tru		00					
			Other salaries and wages		00					
	enses	13	Interest				00			
and Diel	ourse-		Taxes		00					
mer			Rents				00			
			Depreciation and depletion (See instructions				00			
		17	Other expenses and disbursements. Attach : Total expenses and disbursements. Add line	SCNeaule	vers and an Cids 1 Dort I	line 0 17	00			
Scł	nedul	e L	Balance Sheet	Beginning of	taxable vear	End of ta	xable year			
Ass		_		(a)	(b)	(c)	(d)			
				(4)	40,119	(0)	• 30,375			
					0		00,070			
			nts receivable		0		0			
			receivable				0			
			S		0		0			
			d state government obligations		0		0			
	6 Investments in other bonds				0		0			
			ts in stock		0		0			
	-	-	loans		0		0			
			stments. Attach schedule	0	0		0			
10	-		able assets	0	0	0	0			
			cumulated depreciation	0	0	0	0			
					0		0			
			ets. Attach schedule		0		0 00 075			
			ts		40,119		30,375			
			net worth							
			payable		1,627		• 181			
			ons, gifts, or grants payable		0		0			
16	Bonds	and	l notes payable		0		0			
			s payable		0		0			
			lities. Attach schedule		0		0			
			ck or principal fund		0		0			
			capital surplus. Attach reconciliation		0		0			
			arnings or income fund		0		0 00 105			
			lities and net worth		38,485		30,195			
Scr	edule	• M-			13 column (d) is less th	an \$50 000				
1	Net inc	come	e per books	amount on Schedule L, line 13, column (d), is less than \$50,000 7 Income recorded on books this year						
			come tax	not included in this return. Attach schedule						
			pital losses over capital gains B Deductions in this return not charged against book income this year. against book income this year.							
4			t recorded on books this year.							
_	Attach schedule									
5	-	penses recorded on books this year not 9 Total. Add line 7 and line 8								
				· · · · · · · · · · · · · · · · · · ·						
6	Total. /	Add	line 1 through line 5		Subtract line 9 from l	ine 6				