

A For the **2017** Calendar year, or tax year beginning **2017-01-01** and ending **2017-12-31**

B Check if available

Terminated for Business

Gross receipts are normally \$50,000 or less

C Name of Organization: **SOLANO ADVOCATES FOR VICTIMS
OF VIOLENCE**

**PO Box 571, Vacaville, CA,
US, 95696**

D Employee Identification
Number **61-1582626**

E Website:

www.savvcenter.org

F Name of Principal Officer: **MariCarmen Reyes**

**PO Box 571, Vacaville, CA,
US, 95696**

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

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

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

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