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Department of the Treasury

Return of Organization Exempt From Income Tax

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

benefit trust or private foundation)

2012

OMB No 1545-0047

Open to Public Inspection

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service 2012, and ending For the 2012 calendar year, or tax year beginning July 1 20 13 C Name of organization Society of Plastics Engineers, Color & Appearance Division Check if applicable D Employer identification number Doing Business As Address change 23-2004432 Number and street (or P O box if mail is not delivered to street address) E Telephone number П Room/suite Name change \Box c/o Bruce Mulholland 2042 Bridgette Lane Initial return 859-525-4756 City, town or post office, state, and ZIP code Terminated G Gross receipts \$ Amended return Hebron, KY 41048 Application pending F Name and address of principal officer Ann Smeltzer, chairperson H(a) Is this a group return for affiliates? Yes No H(b) Are all affiliates included? Yes No Clariant Corporation 707 Lindenwood Drive Coraopolis, PA 15108 If "No," attach a list (see instructions) Tax-exempt status 501(c) () ◀ (insert no) ☐ 4947(a)(1) or ☐ 527 Website: ▶ www.specad.org H(c) Group exemption number ▶ Form of organization 🗸 Corporation 🔲 Trust Association ☐ Other ▶ L Year of formation M State of legal domicile Part I Summary Briefly describe the organization's mission or most significant activities: Provide educational and technical programs for the coloring of plastics industry. This includes running technical conferences, supporting local universities and providing Activities & Governance scholarships for students. Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 3 32 Number of independent voting members of the governing body (Part VI, line 1b) 4 32 5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) -0-Total number of volunteers (estimate if necessary) 6 6 32 Total unrelated business revenue from Part VIII, column (C), line 12 7a -0-Net unrelated business taxable income from Form 990-T, line 34 **-**0-Prior Year **Current Year** 8 Contributions and grants (Part VIII, line 1h) . 17,277 Program service revenue (Part VIII, line 2g) 262.800 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . 1,261 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 11 5,700 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 287,038 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 30.104 Benefits paid to or for members (Part IX, column (A), line 4) 14 0-Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 **-**0-16a Professional fundraising fees (Part IX, column (A), line 11e) . . . 0 Total fundraising expenses (Part IX, column (D), line 25) ▶ Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 226,238 Total expenses. Add lines 13-17 (must equal Part+IX, column (A), line-25) 18 256,342 Revenue less expenses. Subtract line 18 from line 12 RECEIVED 19 30,696 Beginning of Current Year End of Year Ø 20 Total assets (Part X, line 16) 478,423 377,215 21 Total liabilities (Part X, line 26) 0 Ф. 22 Net assets or fund balances. Subtract line 21 from line 20 377.215 478,423 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 11-10-13 Sign Date Here MULHOLLA Type or print name and title Print/Type preparer's name Preparer's signature Date Paid Check | ıf self-employed Preparer Firm's EIN ▶ Firm's name **Use Only** Firm's address ▶ Phone no

May the IRS discuss this return with the preparer shown above? (see instructions)

For Paperwork Reduction Act Notice, see the separate instructions.

Yes No Form **990** (2012)

Cat. No. 11282Y

Form 99	0 (2012) Page 2
Part	
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	Provide educational and technical programs for the coloring of plastics industry.
	This includes running technical conferences, supporting local universities and providing scholarships for students.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	If "Yes," describe these changes on Schedule O. 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 \$
	Annual Color & Appearance Division Technical Conferences (ANTEC & CAD RETEC)
	- attended by 600+ people

	•••••••••••••••••••••••••••••••••••••••
4b	(Code:) (Expenses \$ 11,599 including grants of \$0_) (Revenue \$0_)
	Color & Appearance Division Newsletter and Website
	- 3 published issues/year and sent to 1000+ people; website has thousands of hits
	•••••••••••••••••••••••••••••••••••••••

4c	(Code:) (Expenses \$ 32,922 including grants of \$0_) (Revenue \$
	Education Committee Programs
	- Terra State Community College, Color Matching Program
	- SPE Student Support & Scholarships awarded by the Color & Appearance Division
	- Offering archive conference technical papers on DVD as an educational resource

	Other present and the Colonial Colonia
4d	Other program services (Describe in Schedule O.) (Expenses \$o_ including grants of \$o_) (Revenue \$o_)
40	(Expenses \$ _o_ including grants of \$ _o_) (Revenue \$ _o_)

Part	V 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	✓	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		1
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	<u> </u>	✓
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		1
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		1
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		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	Ť		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D. Part III	8	-	1
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		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	۲		
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	 	
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.			
_	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
а	complete Schedule D, Part VI	11a		1
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of the total assets reported in Part X, line 162 if "Yes," complete School to D. Part XIII			,
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		✓
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		✓
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		√
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
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		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D. Parts XI and XII			1
b	Schedule D, Parts XI and XII	12a		
•	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ι)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
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		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		✓
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		✓
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		✓
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
19	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		✓_
	If "Yes," complete Schedule G, Part III	19		✓
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	1	
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			1
	employees? If "Yes," complete Schedule J	23		-
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
А	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		1
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		✓
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
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	38	1	

Form **990** (2012)

Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			
	Check if Goriedate & Contains a response to any question in this rait V		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a		-	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			l
	reportable gaming (gambling) winnings to prize winners?	1c		
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 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
þ	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3ь		<u> </u>
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		/
b	If "Yes," enter the name of the foreign country: ► See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
- -	- · · · · · · · · · · · · · · · · · · ·	5-	-	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	_	-
6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	30		<u> </u>
Vu.	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b		ļ
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	1 1		
	and services provided to the payor?	7a		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		l
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		1
đ	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		1
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		✓_
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	H		لبا
_	organization, have excess business holdings at any time during the year?	8		/
9	Sponsoring organizations maintaining donor advised funds.	0-		
a	Did the organization make any taxable distributions under section 4966?	9a 9b		7
ь 10	Did the organization make a distribution to a donor, donor advisor, or related person?	90		V
а	Initiation fees and capital contributions included on Part VIII, line 12	1 1		\
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	1 1		
11	Section 501(c)(12) organizations. Enter:	i I		
а	Gross income from members or shareholders	i		
b	Gross income from other sources (Do not net amounts due or paid to other sources	i l		
	against amounts due or received from them.)	i l		
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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a		14a		✓
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		ı

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response to any question in this Part VI	See ins	struct	ions.
Section	on A. Governing Body and Management	• :	•	<u>. [/]</u>
Occur	on 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 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.			
ь 2	Enter the number of voting members included in line 1a, above, who are independent . 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?			
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?	3		✓
4 5	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets?	5		1
6 7a	Did the organization have members or stockholders?	6 7a	✓	1
_	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	00		
a b	The governing body?	8a 8b	*	\vdash
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	9	1	
Section	on B. Policies (This Section B requests information about policies not required by the Internal Rever	ue C	ode.)	
			Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		1
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a		1
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		✓
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		1
14 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?	14		•
а	The organization's CEO, Executive Director, or top management official	15a		✓
b	Other officers or key employees of the organization	15b		✓_
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		V
Section	on C. Disclosure	1.00		<u> </u>
17 18	List the states with which a copy of this Form 990 is required to be filed none Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	า 501(c)(3)s	only)
19 20	Own website			oolicy,

	-
Daga	- 7
raue	- 8

Part VII	Compensation of Officers, Directors,	Trustees, Key Employees,	Highest Compensated	Employees, and
	Independent Contractors			

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☑ Check this box if neither the organization no	r any relate	d org	aniz	atic	n c	ompe	nsa	ited any currer	nt officer, director	r, or trustee.
(A) Name and Title	(B) Average	(do n	ot ch	Pos neck ss pe	c) ition more	than o	one n an	(D) Reportable	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of
	week (list any hours for related organizations below dotted line)	Individua or directo	institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)		other compensation from the organization and related organizations
(1) Sharon Ehr	-1-									
Director 2014		1					L	-0-	-0-	Φ.
(2) Steve Esker	-1-									
Director 2014		✓			L			-0-	-0-	
(3) Jamie Przybylski	-1-							1		
Director 2014		✓						-0-	-0-	Ф.
(4) Steve Goldstein	-1-									
Director 2014	<u> </u>	✓			<u> </u>		<u> </u>	-0-	-0-	Ф-
(5) Mark Freshwater	-1-									
Director 2014		✓	L					-0-	-0-	-0-
(6) Austin Reid	-1-									
Director 2014		✓		L			L	-0-	-0-	Φ-
(7) Mark Tyler	-1-									
Director 2014		1						-0-	-0-	Ф-
(8) Roger Reinkcker	-1-]		1						·
Director 2014		✓						-0-	-0-	Ф.
(9) Earl Balthazar	-1-			1						
Director 2015		✓						-0-	-0-	. 4
(10) Alan Bodi	-1-									
Director 2015		✓						-0-	-0-	φ
(11) Hal Button	-1-									-
Director 2015		✓						-0-	-0-	4
(12) Jack Ladson	-1-									
Director 2015		✓					L	-0-	-0-	4
(13) Frank Lavieri	-1-									
Director 2015		✓		L	L	$oldsymbol{f L}$	L	•	-0-	φ
(14) Bruce Mulholland	-1-									
Director 2015 / Treasurer		1						-0-	-0-	Φ.

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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and
	Independent Contractors
	Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization no	r any relate	d orga	aniz	atic	n c	ompe	nsa	ited any currer	t officer, director	r, or trustee.
				(6	C)					· -
(A)	(B)				ition			(D)	(E)	(F)
Name and Title	Average					e than o		Reportable	Reportable	Estimated
	hours per	office	er and			or/trust		compensation	compensation from	
	week (list any hours for	Individual trustee or director	la E	Q	8	3,₹	77	from the	related organizations	other compensation
	related	8₹	₹	Officer	š	9 8	Former	organization	(W-2/1099-MISC)	from the
	organizations below dotted	용트	3	i .	Key employee	88	٦.	(W-2/1099-MISC)		organization and related
	line)	2	🚆	1	Š	₹				organizations
		🖁	Institutional trustee			Highest compensated employee		ł		
	-	ļ	٣	_		<u> 8</u>	-			
(1) (26) Brian West	.1.									
Director 2016		✓		<u> </u>			L	-0-	-0-	ф
(2) (27) Brenda Mullins	-2-			١.				1		
Secretary	<u> </u>		_	✓			L	-0-	-0-	ф
(3) (28) Jeff Drusda	-1-			١.						
Finance Chair		ļ	L.	1			L	-0-	•	<u> </u>
(4) (29) Betty Puckerin	.1-	ļ		١.			l			
Chair-Elect		<u> </u>		✓	_		<u> </u>	-0-	-0-	<u> </u>
(5) (30) Ann Smeltzer	-2-	ļ .		١,				ļ		
Chairperson	ļ	<u> </u>	ļ	✓	<u> </u>		<u> </u>	-0-	-0-	4
(6) (31) Jim Figaniak	-1:	ļ	Ì	١,			ļ	1		_
Immediate Past Chair	ļ	ļ	├	-	⊢		├-	-0-	-0-	4
(7) (32) Sandra Davis	-2-	ł		١,				_	_	_
Councilor				 	├		┢	-0-	-0-	•
(8)	 						İ			
(9)										
(10)	<u> </u>									
(11)	 	 	├	\vdash	-		├			:
		<u> </u>	L	L			_			
(12)										
(13)										
(14)	<u> </u>						\vdash			

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
(C)											
	(B)	,,,,,			ition			(D)	(E)	(F)	
	Average							Reportable	Reportable	Estimated	
		hours per					or/trust		compensation	compensation fro	
		week (list any hours for	오코	'n	ð	~	3.₹	٦	from the	related organizations	other compensation
		related	묽춫	≝	Officer	₹	형물	Former	organization	(W-2/1099-MIS	
		organizations	용트	뤃		탈	8 2	🤻	(W-2/1099-MISC)		organization
		below dotted line)	Individual trustee or director	altr		Key employee	ğ				and related organizations
		·	8	Institutional trustee		٦	Highest compensated employee				3 =
				a	ŀ		8				
(15) Ge	eorge Rangos	-1-									
Directo	or 2015		✓		L			L	-0-		<u>0 </u>
(16) Sł	naryt Reid	-1-									
	or 2015	ļ	✓	Щ	_	_		_	-0-		<u> </u>
*******	neryl Treat	-1-	١,					Ì	_		
	or 2015		✓	Н	<u> </u>	—			-0-	<u></u>	<u> </u>
*******	ott Aumann or 2016	-1-	1						- 0-		
	preen Becker	-1-	Ť	H				H	-0-		<u>0- -0</u>
Directo	***************************************		1	ŀ					۔	·.	ہ ہ
	ud Bykowski	-1-							ļ		•
Directo			✓						٠٠-		o o
(21) Sc	ott Heitzman	-1-									
Directo	or 2016		✓					L.	-0-		<u>o o</u>
	acy Phillips	-1-	_		1						
	or 2016		✓	Щ	_	<u> </u>		┡	-0-		0 0
******	m Rachal	:1:	1					l			
Directo	n Rediske	4		Н		\vdash		\vdash	-0-	· · · · · · · · · · · · · · · · · · ·	<u>-0</u>
Directo		-1-	1					•	-0-		oo
	than Karszes	-1-		-							<u> </u>
Directo	***************************************		1					1			o -
1b	Sub-total								-0-		00
С	Total from continuation sheets to Part	VII, Sectio	n A					▶	-0-		0 0
d	Total (add lines 1b and 1c)					<u></u>		▶	-0-		00
2	Total number of individuals (including but			ose	list	ed a	above	e) w	ho received m	ore than \$100	,000 of
	reportable compensation from the organi	zation ► 🗘	-								
•	Did the appropriation link any former of	c :::								•	Yes No
3	Did the organization list any former of employee on line 1a? If "Yes," complete 3									est compens	· 3 /
4	For any individual listed on line 1a, is the									encation from	
-	organization and related organizations										
	individual	-									. 4 1
5	Did any person listed on line 1a receive of										
	for services rendered to the organization?	? If "Yes," c	ompl	ete	Sch	iedu	ıle J f	or s	such person	. <u>.</u>	. 5 ✓
Section	on B. Independent Contractors										
1	Complete this table for your five highest of										
	compensation from the organization. Rep	ort compe	nsatio	on to	or tr	ne c	alend	ar y	ear ending wit	h or within the	organization's tax
	year.										
	(A) (B) (C) Name and business address Description of services Compensation										
none									-		
	Total number of independent contractor	re (includir	na be	ıt n	nt I	imi+	ed to	L	nea lietad aha	ave) who	43.
-	received more than \$100,000 of compens							, u	_	WILL WILL	
				- J					<u> </u>		

Form **990** (2012)

Pari	VIII	Statement of Revenue		han in thin Dart V	711		_
		Check if Schedule O contains a re	sponse to any ques	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ats nts	1a	Federated campaigns	1a . o.				
	b	Membership dues	1b _o_	1			
9,6	С	Fundraising events	1c _o_	İ			
Par Ja	d	Related organizations	1d 2,007				
18, E	е		1e _o_				
t S	f	All other contributions, gifts, grants,					
重量		and similar amounts not included above	1f 15,270				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines 1a-1					
	h	Total. Add lines 1a-1f		17,277			
9	_		Business Code				
946	2a	CAD RETEC 2012 revenue	813920	261,575	261,575	-0-	
ě.	b	Educational DVDs	813920	1,225	1,225	-0-	
울	C	***************************************					
ଞ୍ଚ	d						
TaT	e	All					
Program Service Revenue	l t	All other program service revenue		-0-		-0-	
	<u>g</u> 3	Total. Add lines 2a–2f	ividends interest	262,800	1		
				4 264	4 204		•
	4	Income from investment of tax-exem	i i	1,261	1,261 -0-	-0- -0-	
	5	Royalties	•	4	-0		
	•	(i) Real	(II) Personal				
	6a	Gross rents	<u>-</u> О-				
	ь	Less: rental expenses	-0-				
	С	Rental income or (loss)	-O -O				
	d	Net rental income or (loss)		-0-	-0-	-0-	<u> </u>
	7a	Gross amount from sales of (i) Securities	s (II) Other				
	Ì	assets other than inventory	Ф				
	b	Less: cost or other basis					
		and sales expenses	<u>-0 -0</u>				
	c	Gain or (loss)	<u>-0 -0</u>				
	d	Net gain or (loss)	· <u>· · · • • • • • • • • • • • • • • • •</u>	-0-	-0-	-0-	-0-
venue	8a	Gross income from fundraising events (not including \$.				
Other Re		of contributions reported on line 1c) See Part IV, line 18	а				
5	ı	Less: direct expenses					
		Net income or (loss) from fundrais		-0-		-0-	
	9a	Gross income from gaming activitie		i			
		See Part IV, line 19					
		Less: direct expenses					
	1	Net income or (loss) from gaming		-0-	-0-	-0-	
	i iua	Gross sales of inventory, le returns and allowances	j j			l	
	b	Less: cost of goods sold Net income or (loss) from sales of					
	౼	Miscellaneous Revenue	Business Code	-0-			
	11a						
	b	Conference seed money return	813920	5,700	5,700		<u> </u>
	C						
	d	All other revenue		 			
	e	Total. Add lines 11a-11d		5,700			γ
	12	Total revenue. See instructions.		297 039	269 761		

Part IX S	Statement of	Functional	Expenses
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Sectio	n 501(c)(3) and 501(c)(4) organizations must con	nplete all columns. A	II other organization	ns must complete co	lumn (A).
	Check if Schedule O contains a respon	se to any question	in this Part IX		🗆
	t include amounts reported on lines 6b, 7b, , 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 governments and				,
	organizations in the United States. See Part IV, line 21	1,604	1,604		_
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	28,500	28,500		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	•	•		
4	Benefits paid to or for members	ф	-0-		
5	Compensation of current officers, directors,				
	trustees, and key employees	-0-	٠	-0-	0-
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	-0-	-0-	-0-	-0-
7	Other salaries and wages	-0-	-0-	-0-	<u> </u>
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	_	_		
•		-0-	-0-	-0-	
9 10	Other employee benefits	-0-	-0-	<u></u>	<u> </u>
11	Fees for services (non-employees):	-0-	-0-		-0-
''	Management	٠٠-			
b	Legal	4	-0-l	- - -	<u></u> -0-
c	Accounting	4	- - -	-0-	<u> </u>
ď	Lobbying	-0-	<u> </u>	4	<u>~</u>
е	Professional fundraising services. See Part IV, line 17	Ф.			-0-
f	Investment management fees	4	-0-	-0-	-0-
g	Other (If line 11g amount exceeds 10% of line 25, column				
_	(A) amount, list line 11g expenses on Schedule O)	φ.	٠-	-0-	-0-
12	Advertising and promotion	7,430	7,430	-0-	Φ.
13	Office expenses	9,113	8,599	514	-0-
14	Information technology	3,000	3,000	-0-	-0-
15	Royalties	4	-0-	-0-	<u> </u>
16	Occupancy	-0-	-0-	-0-	-0-
17	Travel		-0-	-0-	<u>-0-</u>
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	_			
10	•	-0-	-0-	-0-	<u> </u>
19 20	Conferences, conventions, and meetings . Interest	165,435	151,891	13,544	<u>-0</u>
21	Payments to affiliates	-0- 41,260	-O- -O-	41.350	<u>-0-</u>
22	Depreciation, depletion, and amortization .	41,260	- 	41,260	<u></u> Ф
23	Insurance	-0-	<u>-</u>	-0-	<u>~</u>
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.)				
а		-0-	-0-	-0-	-0-
b		-0-	-0-	-0-	-0-
С		-0-	-0-	-0-	-0-
d	All 11		-0-	-0-	-0-
e	All other expenses	Ф	٠٠-	-0-	-0-
25	Joint costs. Complete this line only if the	256,342	201,024	\$55,318	-0-
26	organization reported in column (B) joint costs I				
	from a combined educational campaign and			ļ	
	fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)				

P	art X	Balance Sheet				
		Check if Schedule O contains a response to	any question in this Part X			🔲
				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		66,933	1	89,459
	2	Savings and temporary cash investments	2,617		9,528	
	3	Pledges and grants receivable, net	4	3	-0-	
	4	Accounts receivable, net		4	4	-0-
	5	Loans and other receivables from current and t	former officers, directors.			
		trustees, key employees, and highest co				
		Complete Part II of Schedule L		4	5	-0-
	6	Loans and other receivables from other disqualified pers	ons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), an				
		sponsoring organizations of section 501(c)(9) volun	tary employees' beneficiary			
2		organizations (see instructions). Complete Part II of Sche	dule L	4	6	-
Assets	7	Notes and loans receivable, net		-0-	7	<u> </u>
¥	8	Inventories for sale or use		Φ	8	4
	9	Prepaid expenses and deferred charges		4	9	Φ
	10a	Land, buildings, and equipment: cost or	I I – – – – – – – – – – – – – – – – – –			·
		other basis. Complete Part VI of Schedule D	10a -o-			
	ь	Less: accumulated depreciation	10b -0-	.	10c	
	11	Investments—publicly traded securities		307,665	1	379,436
	12	Investments-other securities. See Part IV, line 1	11	-0-	12	Φ
	13	Investments-program-related. See Part IV, line	11	-0-	13	.
	14	Intangible assets		-0-	14	4
	15	Other assets. See Part IV, line 11	<i></i>	-0-	15	-0-
	16	Total assets. Add lines 1 through 15 (must equa		377,215	16	478,423
	17	Accounts payable and accrued expenses		-0-	17	-0-
	18	Grants payable	ф.	18	- 	
	19	Deferred revenue			19	-0-
	20	Tax-exempt bond liabilities	[.	20	-
	21	Escrow or custodial account liability. Complete F	Part IV of Schedule D .		21	Ф
89	22	Loans and other payables to current and for	· · · · · · · · · · · · · · · · · · ·			
豊		trustees, key employees, highest compen				
Liabilities		disqualified persons. Complete Part II of Schedu	<u></u>	.	22	<u>-</u>
_	23	Secured mortgages and notes payable to unrela		<u>Ф</u>	23	-0-
	24	Unsecured notes and loans payable to unrelated	·	-0-	24	<u>-0-</u>
	25	Other liabilities (including federal income tax, i				
		parties, and other liabilities not included on lines				
		of Schedule D		Ф-	25	<u>-0-</u>
	26	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958)		Ф.	26	-0-
68		complete lines 27 through 29, and lines 33 and				
n n	27	Unrestricted net assets		-0-	27	-0 -
Jak	28	Temporarily restricted net assets			28	
d E	29	Permanently restricted net assets		φ	29	<u> </u>
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 95 complete lines 30 through 34.				
0	30	Capital stock or trust principal, or current funds	-	444 000	30	445 500
set	31	Paid-in or capital surplus, or land, building, or ed		114,807 -0-	31	145,503
As	32	Retained earnings, endowment, accumulated inc	· ·	262,408	-	-0- 332,920
et	33	Total net assets or fund balances		377,215		478,423
~	34	Total liabilities and net assets/fund balances .		377,215		478,423
				0,7,4,10	· · · · · · · · · · · · · · · · · · ·	Form 990 (2012)

		Pa	ge 12	
<u></u>	<u></u>	•	_Ц	
			17,038	
			6,342	
			0,696	
			7,215 0,512	
			<u>0,312</u> -0-	
			•	
			<u> </u>	
			<u>-0-</u>	
		47	<u>8,423</u>	
		Yes	No	
_ n				
''				
	2a		✓	
r				
	2b		1	

Form 990 (2012)

Part XI Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI 1 2 2 3 3 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . 4 5 5 6 Donated services and use of facilities . . 6 7 7 8 8 Other changes in net assets or fund balances (explain in Schedule O) 9 9 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII . . . 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: ☐ Consolidated basis ☐ Both consolidated and separate basis Separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. As a result of a federal award, was the organization required to undergo an audit or audits as set forth in За 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 Зh

Form 990 (2012)

SCHEDULE A (Form 990 or 990-EZ)

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.

2012 Open to Public Inspection

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Society of Plastics Engineers, Color & Appearance Division 23-2004432 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 11, 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.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) An organization that normally receives: (1) more than 331/3% 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 331/3% 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.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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 that describes the type of supporting organization and complete lines 11e through 11h. **c** Type III-Functionally integrated d Type III-Non-functionally integrated **b** ☐ Type II e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disgualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes No 11g(i) (ii) A family member of a person described in (i) above? . . . 11g(iı) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . 11g(in) Provide the following information about the supported organization(s). (iii) Type of organization (iv) is the organization (vi) Is the (i) Name of supported (ii) EIN (v) Did you notify (vii) Amount of monetary the organization in in col (i) listed in your organization (described on lines 1-9 organization in col support col (i) of your governing document? (i) organized in the above or IRC section US? (see instructions)) Yes Nο Yes No Yes No (A) (B) (C) (D) (E) **Total**

Part	(Complete only if you checked th	e box on line	e 5, 7, or 8 of	Part I or if the	e organizatio	n failed to qu	
	Part III. If the organization fails to	qualify und	er the tests lis	ted below, p	lease comple	ete Part III.)	
	on A. Public Support	(=) 0000	(h) 0000	(a) 0010	(4) 0011	(-) 0010	(A Total
1	dar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
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						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.				<u> </u>	<u> </u>	
	on B. Total Support	() 2222			400044	1 1 2 2 2 2	
Calen 7	dar year (or fiscal year beginning in) Amounts from line 4	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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 IV.)						
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc First five years. If the Form 990 is for the organization, check this box and stop her	e organizatio		d, thırd, fourth	, or fifth tax y		
Secti	on C. Computation of Public Suppor	t Percentag	je				
14	Public support percentage for 2012 (line 6					14	%
15 16a	Public support percentage from 2011 Sch 331/2% support test—2012. If the organiz box and stop here. The organization qual	zation did not	check the box	on line 13, and	d line 14 is 33¹		heck this
b	331/3% support test-2011. If the organ	ization did no	ot check a box	on line 13 or	16a, and line		or more,
17a	check this box and stop here. The organization qualifies as a publicly supported organization						
b	10%-facts-and-circumstances test – 20 15 is 10% or more, and if the organizat Explain in Part IV how the organization m supported organization	ion meets the eets the	e "facts-and-ci s-and-circums	rcumstances" tances" test. T	test, check the organization	nis box and st on qualifies as	op here.
18	Private foundation. If the organization die	d not check a	box on line 13	, 16a, 16b, 17a	a, or 17b, chec	k this box and	see

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 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.)

	in the organization rails to quality	under the tes	sts listed beit	w, please co	impiete Fart i	<u>ı.) </u>	
	on A. Public Support	 			· · · · · · · · · · · · · · · · · · ·	· · · · · ·	
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees					i	
_	received. (Do not include any "unusual grants")	12,800	9,700	5,500	3,600	17,277	48,877
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the				i	į.	
	organization's tax-exempt purpose	186,709	166,565	186,135	194,184	262,800	996,393
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513	l ol	ol	ol	اه	o	0
4	Tax revenues levied for the					1	
	organization's benefit and either paid						
	to or expended on its behalf	o	اه	o	o	ا	•
5	The value of services or facilities			U			U
3	furnished by a governmental unit to the	1					
	organization without charge	_	_	_		_ [_
•	-	0	0	0	0	<u> </u>	0
6 7-	Total. Add lines 1 through 5	199,509	176,265	191,635	197,784	280,077	1,045,270
/a	Amounts included on lines 1, 2, and 3					ļ	
	received from disqualified persons .	0	0	0	0	0	0
b	Amounts included on lines 2 and 3						
	received from other than disqualified	İ					
	persons that exceed the greater of \$5,000	į į					
	or 1% of the amount on line 13 for the year	0	o	0	0	o	0
С	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support (Subtract line 7c from	#### S	A CONTRACTOR	The second	CHICAGO.		
	line 6.)						1,045,270
Secti	on B. Total Support						1,0 10,210
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	199,509	176,265	191,635	197,784	280,077	1,045,270
10a	Gross income from interest, dividends,	100,000	170,200	151,055	137,734	200,077	1,043,270
	payments received on securities loans, rents,						
	royalties and income from similar sources .	4 303	64	4 045	222	4 004	3.047
.	·	1,263	61	1,915	338	1,261	7,847
U	Unrelated business taxable income (less section 511 taxes) from businesses						
	•	0	0	0	0		0
	Add lines 10a and 10b	1,263	61	1,915	338	1,261	7,847
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on	0	0	0	0	0	0
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)	0	o	. 0	o	o	0
13	Total support. (Add lines 9, 10c, 11,						
	and 12)	200,772	176,326	193,550	198,122	281,338	1,050,108
14	First five years. If the Form 990 is for the		's first, second	d, third, fourth,	or fifth tax ye	ar as a section	501(c)(3)
	organization, check this box and stop he						▶ □
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2012 (line 8			3. column (f))		15	99.54 %
16	Public support percentage from 2011 Sch					16	99.28 %
	on D. Computation of Investment In			<u></u>		1.01	33.26 /0
17	Investment income percentage for 2012 (/ line 13 colum	nn (fl)	17	0.75 %
18	Investment income percentage from 2011					18	
19a	33 ¹ / ₁₃ % support tests—2012. If the organ						0.81 %
134	17 is not more than 33½%, check this box						
L			_	-		-	_
b	331/3% support tests—2011. If the organiz						
00	line 18 is not more than 331/3%, check this I Private foundation. If the organization di						
20	- Frivate Journation, II the organization di	u noi check a t	ox on line 14	THA OF IMP C	DECK INS DOX :	ann see instruc	uons 🗩 I l

cnedule A (I	rom 990 or 990-E2) 2012	Page 🔫
Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).	
		·
	,	

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

Inspection
Employer identification number

Societ	y of Plastics Engineers, Color & Appearance Division	23-2004432
Par	Organizations Maintaining Donor Advised Funds or Other Similar F	unds or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6.	·
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year) .	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	<u> </u>
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 con	
6	Did the organization inform all grantees, donors, and donor advisors in writing that g	
·	only for charitable purposes and not for the benefit of the donor or donor advisor, o	
	conferring impermissible private benefit?	
Dar		
	Conservation Easements. Complete if the organization answered "Yes	to 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)	
	_	of a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribu	tion in the form of a conservation
	easement on the last day of the tax year.	
		Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
С	Number of conservation easements on a certified historic structure included in (a) .	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and no	ot on a
	historic structure listed in the National Register	· · 2d
3	Number of conservation easements modified, transferred, released, extinguished, or to	erminated 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, i	nspection, handling of
	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation	-
	>	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation ea	sements during the year
•	►\$	domonio daring the your
8	Does each conservation easement reported on line 2(d) above satisfy the requirement	s of section 170(h)(4)(B)
•	(i) and section 170(h)(4)(B)(ii)?	· · · · · · · · · · · · · · · · · · ·
9	In Part XIII, describe how the organization reports conservation easements in its reven	
9	balance sheet, and include, if applicable, the text of the footnote to the organization's	
	organization's accounting for conservation easements.	illiancial statements that describes the
Dar		or Other Cimilar Assets
rail		
	Complete if the organization answered "Yes" to Form 990, Part IV, line	
па	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in	
	works of art, historical treasures, or other similar assets held for public exhibition,	· · · · · · · · · · · · · · · · · · ·
	public service, provide, in Part XIII, the text of the footnote to its financial statements t	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in it	
	works of art, historical treasures, or other similar assets held for public exhibition,	education, or research in furtherance o
	public service, provide the following amounts relating to these items:	
	(i) Revenues included in 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 simi	lar assets for financial gain, provide the
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these	e items:
а	Revenues included in Form 990, Part VIII, line 1	> \$
	Assets included in Form 990 Part Y	•

Page 2	2
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	III Organizations Maintaining	Collections of	Art, Historical 7	reasures, or O	ther Similar Ass	ets (continued)
3	Using the organization's acquisition, collection items (check all that apply):	accession, and ot	her records, chec	k any of the follo	wing that are a sig	
а	☐ Public exhibition		d 🗌 Loan	or exchange prog	rams	
b	☐ Scholarly research		e 🗌 Other	r		
C	□ Preservation for future generations	S				
4	Provide a description of the organizat	tion's collections a	and explain how t	hey further the org	ganızatıon's exemp	ot purpose in Part
5	During the year, did the organization assets to be sold to raise funds rather					
Part						
	line 9, or reported an amoun			,a		000, . a,
1a	Is the organization an agent, trustee			or contributions o	other assets not	
	included on Form 990, Part X?					☐ Yes ☐ No
b	If "Yes," explain the arrangement in P					
	g	-	g		Am	ount
С	Beginning balance			10	;	
d	Additions during the year				i i	
е	Distributions during the year				,	
f	Ending balance			-		
2a	Did the organization include an amoun					☐ Yes ☐ No
b	If "Yes," explain the arrangement in P	·				
Par						
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	262,408	256,069	167,446	181,380	286,281
b	Contributions	4	-0-	19,920	-0-	4
C	Net investment earnings, gains, and					
	losses	70,512	6,339	68,703	(13,934)	(84,901)
_				-0-	-0-	
d	Grants or scholarships	-0-	-0-			20,000
d e	Grants or scholarships Other expenditures for facilities and	-Ф-	-0-	· · · · · · · · · · · · · · · · · · ·		20,000
	•	-O-	<u>-0-</u>	-0-	→	-0-
	Other expenditures for facilities and					
e	Other expenditures for facilities and programs	Ф Ф	- 0	- -	-0- -0-	-0-
e f	Other expenditures for facilities and programs	-0- -0- 332,920	-0- -0- 262,408	-0- -0- 256,069	-0- -0- 167,446	-0- -0-
e f g	Other expenditures for facilities and programs	-0- -0- 332,920 the current year en	-0- -0- 262,408	-0- -0- 256,069	-0- -0- 167,446	-0- -0-
e f g 2	Other expenditures for facilities and programs	-0- 332,920 the current year en nt \(\bigsim \) 10	-0- -0- 262,408 d balance (line 1g	-0- -0- 256,069	-0- -0- 167,446	-0- -0-
e f g 2 a	Other expenditures for facilities and programs	-0- 332,920 the current year en nt \(\bigsim \) 10	-0- -0- 262,408 d balance (line 1g	-0- -0- 256,069	-0- -0- 167,446	-0- -0-
f g 2 a b	Other expenditures for facilities and programs	-0- 332,920 the current year en nt ▶ 10 % %	-0- -0- 262,408 d balance (line 1g 0%	-0- -0- 256,069 , column (a)) held	-0- -0- 167,446 as:	-0- -0- 181,380
f g 2 a b	Other expenditures for facilities and programs	-0- 332,920 the current year en nt ▶ 10 % %	-0- -0- 262,408 d balance (line 1g 0%	-0- -0- 256,069 , column (a)) held	-0- -0- 167,446 as:	-0- -0- 181,380
f g 2 a b	Other expenditures for facilities and programs	the current year en 10 % % 2c should equal 10 e possession of the	-0- -0- 262,408 d balance (line 1g 0%	-0- -0- 256,069 , column (a)) held	-0- -0- 167,446 as:	-0- 181,380 Yes No
f g 2 a b	Other expenditures for facilities and programs	the current year en 10 332,920 the current year en 10 % % 2c should equal 10 e possession of th	-0- -0- 262,408 d balance (line 1g 0%	-0- -0- 256,069 , column (a)) held	-0- -0- 167,446 as:	-0- -0- 181,380 Yes No 3a(i) /
f g 2 a b	Other expenditures for facilities and programs	the current year en 10 332,920 the current year en 10 % % 2c should equal 10 e possession of th	d balance (line 1g	256,069 , column (a)) held	-0- -0- 167,446 as:	Yes No 3a(i) 3a(ii) Yes
e f g a b c	Other expenditures for facilities and programs	-0- 332,920 the current year en nt 10 % 2c should equal 10 e possession of th	d balance (line 1g 0% 0% 00% ee organization the	at are held and action in the control of the contro	-0- -0- 167,446 as:	-0- -0- 181,380 Yes No 3a(i) /
f g 2 a b c 3a	Other expenditures for facilities and programs	the current year en 10 % 2c should equal 10 e possession of the izations listed as resisted as resi	-0- 262,408 d balance (line 1g 0% 0% ee organization the equired on Sched on's endowment for	at are held and active R?	-0- -0- 167,446 as:	Yes No 3a(i) 3a(ii) Yes
e f g a b c	Other expenditures for facilities and programs	-0- 332,920 the current year en nt 10 % 2c should equal 10 e possession of th	262,408 d balance (line 1g 0% 0% ee organization the cequired on Sched on's endowment for	at are held and active R?	-0- -0- 167,446 as:	Yes No 3a(i) 3a(ii) Yes
f g 2 a b c 3a	Other expenditures for facilities and programs	the current year en 10 % 2c should equal 10 e possession of the izations listed as resisted as resi	262,408 d balance (line 1g 0% 0%. se organization the con's endowment for 1990, Part X, lin her basis (b) Cost of	at are held and active services at a respective -0- -0- 167,446 as:	Yes No 3a(i) 3a(ii) Yes	
f g 2 a b c 3a	Other expenditures for facilities and programs	2c should equal 10 e possession of the current listed as residual soft the organization ment. See Form	262,408 d balance (line 1g 0% 0%. se organization the con's endowment for 1990, Part X, lin her basis (b) Cost of	at are held and active services at a respective -0- 167,446 as: Iministered for the	Yes No 3a(i) / 3b	
f g 2 a b c 3a b 4 Part	Other expenditures for facilities and programs	2c should equal 10 e possession of the current listed as residual soft the organization ment. See Form	262,408 d balance (line 1g 0% 0%. se organization the con's endowment for 1990, Part X, lin her basis (b) Cost of	at are held and active services at a respective -0- 167,446 as: Iministered for the	Yes No 3a(i) / 3b	
f g 2 a b c 3a b 4 Part	Other expenditures for facilities and programs	2c should equal 10 e possession of the current listed as residual soft the organization ment. See Form	262,408 d balance (line 1g 0% 0%. se organization the con's endowment for 1990, Part X, lin her basis (b) Cost of	at are held and active services at a respective -0- 167,446 as: Iministered for the	Yes No 3a(i) / 3b	
f g 2 a b c 3a b 4 Part	Other expenditures for facilities and programs	2c should equal 10 e possession of the current listed as residual soft the organization ment. See Form	262,408 d balance (line 1g 0% 0%. se organization the con's endowment for 1990, Part X, lin her basis (b) Cost of	at are held and active services at a respective -0- 167,446 as: Iministered for the	Yes No 3a(i) / 3b	
f g 2 a b c 3a b 4 Part	Other expenditures for facilities and programs	-0- 332,920 the current year en 10 % % 2c should equal 10 e possession of th	d balance (line 1g 0% 0% 0% 0% e organization the condition of the balance (line 1g 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0%	at are held and act are	-0- 167,446 as: Iministered for the	Yes No 3a(i) / 3b

Part VII	Investments - Other Securities	. See Form 990, Part X,	line 12.	
	n) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market va	lue
	derivatives			
	held equity interests			
(3) Other				
(A)				
(B)		 		
(C)				
(D)				
(E)				
(F) (G)				
(H)				
(I)				
	(b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments—Program Related	See Form 990 Part X	line 13	
	(a) Description of investment type	(b) Book value	(c) Method of valuation	
	(a) Description of investment type	(b) Dook value	Cost or end-of-year market va	lue
(1)	. <u>.</u>			
(2)				
(3)				
(4)				
(5)				
(6)				
<u>(7)</u>				
(8)	-			
(10)				
	(b) must equal Form 990, Part X, col. (B) line 13.) ▶		 	
Part IX	Other Assets. See Form 990, Pa	rt X. line 15.	<u> </u>	
) Description		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
_(6)				
(7)				
(8)				
(9)				
(10)	ımn (b) must equal Form 990, Part X, co	ol (D) line 15)		
Part X	Other Liabilities. See Form 990,		<u> ▶ </u>	
1.	(a) Description of liability	(b) Book value		
	income taxes	(b) Book Value	4	
(2)	THE TAXES		4	
(3)			†	
(4)			†	
(5)			†	
(6)			1	
(7)			1	
(8)	-		1	
(9)	· ·		1	
(10)		·	1	
(11)			1	
Total. (Column	(b) must equal Form 990, Part X, col. (B) line 25)		1	
2. FIN 48 (AS	SC 740) Footnote. In Part XIII, provide the t	ext of the footnote to the org	ganization's financial statements that reports	the organization's
liability for u	ncertain tax positions under FIN 48 (ASC 7	40). Check here if the text of	the footnote has been provided in Part XIII	<u> </u>

Schedu	le D (Form 990) 2012				Page 4
Part	XI Reconciliation of Revenue per Audited Financial Stateme	nts	With Revenue per	Retu	m
1	Total revenue, gains, and other support per audited financial statements	_		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
C	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
а	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			5	
Part	XII Reconciliation of Expenses per Audited Financial Statem	<u>ents</u>	With Expenses pe	r Re	turn
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		1		
a	Donated services and use of facilities	2a			
b	Pnor year adjustments	2b			
C	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	<u> </u>		
е	Add lines 2a through 2d	•		2e	<u> </u>
3	Subtract line 2e from line 1			3	
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			
ь	Other (Describe in Part XIII.)	4b	<u> </u>		
_	Add lines 4a and 4b	. 101		4c	
5 Dow	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	: 10.)	<u> </u>	5	
	XIII Supplemental Information				
Part V	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9, line 4; Part X, line 2; Part XI, lines 2d and 4b, ation.				
Part V.	line 4: endowment fund is used to award scholarships to students, administer	ed by	the Board of Directors	. In lie	eu of making
contril	outions to the endowment fund, the Board of Directors have chosen to pay any	schol	larships out of the ope	ratino	budget of the
				<i>H</i> .	
organi	zation over the last several years, to preserve the funds in the endowment fund	. Tha	at is why there are no s	cholar	ships listed
¥					
on line	1d, columns a through d.				
	······		******************************		
				••••••	
	·				

Page 5 Part XIII Supplemental Information (continued)							
Part XIII	Supplemental Information (continued)						
		••••••••					
		•••••					

SCHEDULEI (Form 990)

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

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2012

Schedule I (Form 990) (2012) Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Open to Public Inspection ° □ (h) Purpose of grant or assistance Employer Identification number ✓ Yes 23-2004432 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. Complete if the organization answered "Yes" to Form 890, Part IV, line 21 or 22. (f) Method of valuation (book, FMV, appraisal, other) Cat. No. 50055P Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (e) Amount of non-cash assistance Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ Attach to Form 990. (d) Amount of cash grant Enter total number of other organizations listed in the line 1 table (c) IRC section if applicable the selection criteria used to award the grants or assistance? For Paperwork Reduction Act Notice, see the instructions for Form 890. General Information on Grants and Assistance Society of Plastics Engineers, Color & Appearance Division (b) EIN 1 (A) Name and address of organization or government Department of the Treasury Internal Revenue Service Name of the organization Part II Part I <u>R</u> ල € 8 € 9 9 6 5 Ξ

(f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional Scholarships are paid to universities and not directly to the student. The ensures that the student is enrolled and that the money goes towards student expenses. n/a (e) Method of valuation (book, FMV, appraisal, other) Students have to re-apply each year for scholarships which allows us to re-assess need, academic achievement, and other eligibility requirements. n/a ø (d) Amount of non-cash assistance 28,500 (c) Amount of cash grant Part III can be duplicated if additional space is needed. (b) Number of reciplents 6 1 Scholarships for students in related study (a) Type of grant or assistance information. Part IV Part III N က Ŋ ø

SCHEDULE O (Form 990 or 990-EZ)

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.

2012
Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Employer identification number

Society of Plastics Engineers, Color & Appearance Division 23-2004432 Form 990, Part VI, Section A, Line 6. Member classes are controlled by the parent organization and not by the Color & Appearance Division. In general, there are student members, professional members, emeritus members, honored service members and fellow members. Voting rights and other rights of the various member classes are defined in the by-laws of the Society of Plastics Engineers. Form 990, Part VI, Section A, Line 9. See names below. Form 990, Part VI, Section B, Line 11b. The organization reviews and audits the annual financial report prior to filling Form 990. The financial report provides all of the information to complete Form 990. The completed Form 990 is reviewed at the director's meeting immediately following the filing of Form 990. Form 990, Part VI, Section C, Line 19. Meeting minutes are published in newsletters sent to all members and posted on the web-site. Board of Director's meeting minutes includes the treasurer's report which shows the financial statements for the organization. Form 990, Part VI, Section A, Line 9: (1) Aumann, Scott EMD Chemicals 107 Nilsson Drive Savannah, GA 31410 (2) Balthazar, Earl SpectroTechs Color Solutions 6515 Fannin Farm Way Artington, TX 76001-5803 (3) Becker, Doreen A Schulman CCNE 53 Millbrook Street Worchester, MA 01806 (4) Bodi, Alan Uniform Color 80 Northwest St. Norwalk, Ohio 44857 (5) Button, Hal Akrochem Corporation 255 Fountain Street Akron, OH 44304 (6) Bykowski, Paul GB Consulting 7421 Lemburg Road Portage, IN 46368 (7) Davis, Sandra DuPont Titanium Technologies Chestnut Run Plaza 709/104 974 Centre Road P.O Box 2915 Wilmington, DE 19805 (8) Drusda, Jeff Silberline Manufacturing Co., Inc. 36 Progress Ave. Tamagua, PA 18252 (9) Ehr, Sharon Uniform Color 942 Brooks Ave. Holland, MI 49423 (10) Esker, Steve Paramount Colors, Inc. 10186 Taylor Road SW Etna, OH 43068 (11) Figaniak, Jim LTL Color Compounders, Inc. 20 Progress Drive Morrisville, PA 19067 (12) Freshwater, Mark Lansco Colors 1342 Alexandria Parkway Canton, OH 44709 (13) Goldstein, Steve Clariant Masterbatches 85 Industrial Dr Holden, MA 01520 (14) Heitzman, Scott Sun Chemical Corporation 5020 Spring Grove Avenue Cincinnati, OH 45232

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