

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2018

Department of the Treasury Internal Revenue Service

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

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

<u>A</u>	For the	2018 cale	ndar year, or tax year be	ginning	<u>.</u>	, 2018, ar	nd ending			, 20	
В	Check if a	applicable	C Name of organization Divi	sion of /	Agrochemicals (AGRO),	American	Chemical S	Society	D Employe	er identification n	umber
	Address of	change	Doing business as ACS/A						L	51-0193197	
	Name cha	ange	Number and street (or P O.	box if ma	il is not delivered to street ac	idress)	Room/suite		E Telephor	ne number	
\Box	Initial retu	•	1010 Sycamore Lane							573-443-6134	
ñ		n/terminated		nce, count	try, and ZIP or foreign postal	code					
$\overline{\cap}$	Amended		Columbia, MO 65203						G Gross re	ceipts \$	
ñ			F Name and address of princi	oal officer	Dei A. Koch			Hial is this a c		subordinates? Yes	√ No
_	Application		1010 Sycamore Lane, Co				\mathcal{M}	1		sincluded? Tes	_
	Tax-exem			501(c) () ◀ (insert no) ☐ 49	47/2)/1) 05 [7[2/7	1 ''		list (see instructio	
' _	Website:		w.agrodiv.org	1 30 I(c) () 4 (IIISEIT 110) L. 43	47 (a)(17 O1 _ L		1	exemption	•	,
		rganization		Account	ion Other ▶	I Vear	of formation			of legal domicile	DC
_	art I	Summ	=	ASSOCIAL	IOII Ollier P	Liteal	Orionnation	1972	W State	or regal domicile	
			escribe the organization	'o missi	on or most significant	activitios:	Discomin	ation of s	ciontific in	formation rolati	ing to
•	i i	•	•		on or most significant	activities.	DISSERIUM	auon or 5	Cientinic III	iioiiiauoii telau	ing to
Activities & Governance	! !	cnemistry	for and/or from agricultu	ure		·					
Ē	١	, , , , , , , , , , , , , , , , , , ,							050/ -63		
×e	,		is box ▶ ☐ If the organi		-					its net assets.	
Ğ			of voting members of th	-							15
S.			of independent voting m								15
itie			nber of individuals empl			art V, line	2a)		5		0
휹			nber of volunteers (estin		• •				6		35
ĕ			elated business revenue						7a		
	Ь	Net unrei	ated business taxable ir	ncome f	rom Form 990-T. line	38		· · · · ·	7b		
					N RECEIVEL) [Prior Y	ear	Current Ye	ar
Revenue	8 (Contribut	tions and grants (Part VI	III, lin ë 1	h) . !\L		L_		55,564	\$7	70,618.30
	9 1	Program	service revenue (Part VI	III, line 2	29	a lõl			31,167	\$5	50,404.30
ě	10 I	Investme	nt income (Part VIII, colu	umn (Å)	ines \$13, Vand 17d) LU	19 191	[_		90,996	\$1	18,674.21
Œ	11 (Other rev	enue (Part VIII, column	(A), line	38, 6d, 8c, 9c, 10c, ar	1d.11e)	Γ^{-}		821		\$927.08
			enue-add lines 8 throug				e 12)		178,548		\$140,624
_			nd similar amounts paid						34,140		59,167.25
			paid to or for members (·	🗀				
w	ľ		other compensation, emp		* * *	(A), lines 5-	-10)				
Se	,		nal fundraising fees (Pa	-							
Expenses			draising expenses (Part				· ·				
X			penses (Part IX, column						100,586	\$16	50,471.90
		-	enses. Add lines 13-17			 Al line 251	·		134,726		\$219,639
			less expenses. Subtrac	•					43.822		-\$79,015
L 47		Hevenue	iess expenses. Subtrac	inie ic	THOM INC 12			unning of Ci		End of Yea	
et Assets or ind Balances	20 -	Total aca	ata (Dart V. Jina 16)				<u>-35</u>				
Sse Bak	20		ets (Part X, line 16) ilities (Part X, line 26) .						697,918		\$560,673
te p	21						· · -				
ŽŽ			ts or fund balances. Sub	otract iir	ne 21 from line 20 .	<u> </u>	 		697,918		\$560,673
_	art II		ure Block								
			ry, I declare that I have examin ete Declaration of preparer (ot							ly knowledge and	belief, it is
	e, consci,	, and compr	ete Deciaration of preparer (or		onicery is based on all inform	addit of Willo	тргоранст по	- I	- 1		
٥.	Į		Delas	Kal.	n				Octo	per 30	<u> </u>
Sig		Signa	ature of officer	· -	 .	_		Da	ite		
He	re		lel A. Koc	<u>k</u> ,	reasure	<u>v</u>					
			or pnnt name and title	J						·	
Pa	id	Print/Typ	oe preparer's name	Ī	Preparer's signature		Date		Check	of PTIN	
	eparer	, L							self-emp		
	e Only	1	ame ▶					Firm	n's EIN ▶		_
US	e Only	, ,	ddress ▶						one no		
Ma	y the IRS		this return with the pre	eparer si	hown above? (see inst	ructions)				🗌 Yes	No
			ction Act Notice see the				Cat No.	11282Y			90 (2018)



Part I	V Checklist of Required Schedules (الكرية Schedules الكرية Schedules الكرية Schedules الكرية كالكرية	<u>) </u>	<u> </u>	rate
£10 1 3	_		Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If EYes, "0	d th	O .	22
	complete Schedule A	X1n	4	✓
		.121	1	-16
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to £	_	0	
٠,	candidates for public office? If "Yes," complete Schedule C, Part I \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		-	1
- ".	· · · ·			<u> </u>
4		r, t	[· 1	24
	election in effect during the tax year? If "Yes," complete Schedule C, Part II at the control of		<u> </u>	/
_`5	10 110 0194 1221011 4 0001011 001(0)(1), 001(0)(0), 01 001(0)(0) 0194 1101 1101 1101 1101 1101 1101 1101	F. 7. 3		١.
V	assessments, or similar amounts as defined in Revenue Procedure 98-197 If. "Yes," complete Schedule C, Part III >	∋:5 ⊾	U (✓
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	97** F.	j ;	
1		ويمؤو	tc	{
-1.7_	"Yes, "complete Schedule D; Part Initiyes to go unusuus raned set serves." in the lost and no selection registrations	16 t	JŁ	✓
	Did the organization receive or hold a conservation easement, including easements to preserve open space,			25
. 7 ,	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II about the environment and areas, or historic structures?			1
- * }-	• • •			Ť
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," y			,
. 1	complete Schedule D; Part III בייתושק אי השור ליים באום באום באום באום באום באום באום באו	1 0 6	17	<u> </u>
'9', _	Did the diganization report an amount in rarry, into 21, for escrets or destocial account habity, solve as a f	Yos.	``	ĺ
		9.49 L	3	35,
. 1		19 n	J	✓
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	EVI);	b	
. L.		.10	n.	V
11 ;	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,17	1 10 1	,	
		ن _ا " ر		
– 1 -	eradi eri i i i i i i i i i i i i i i i i i	1) 34		25
		11a	9	1
)^ ·		_
∕ _b	bid_the organization report an amount for invostments. Other securities in that X, into 12 that is one or more		, *	,
. !		11b		<u>~</u>
	big the diganization report an amount for investments - program related in a large, into to that is 570 or more	78.7		
i	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D; Part VIII אין ביי ביי מתו כיי לאווים או מיי ביי מתו כיי לאווים או מיי ביי מתו כיי לאווים אווים אווי	11c	<u>٠</u>	✓
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	3		1
~ ` ` ` · ·	reported in Part X; line 167. If "Yes," complete Schedule D, Part IX on 0.000.35\$ not the more end address figure	11d	a	.√
	Did the organization report an amount for other liabilities in Part X; line 25? If "Yes," complete Schedule D, Part X.			:/
\ f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	.a: r.	2	
づけ	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X group	11f.	3	1
1	, ; · · · · · · · · · · · · · · · · · ·	ni t		35
	Schedule D. Parts XI and XII	:	. I	7
		_		<u>Έ</u>
þ	Was the organization included in consolidated, independent audited, financial statements for the tax year? (#5)			2
. <u>Y</u>	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional			V
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes;" complete Schedule E ອງ ກວ ໄຮ້ ເສສູນດ ຢູ			11/
-	Did the organization maintain an office, employees, or agents outside of the United States? 1 .504 🛝 🕫 💆		O.	✓
. , ₽	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking to	off c	Q 1	35
	fundraising, business, investment, and program service activities outside the:United States, or aggregate	٤Y"	H x	
V	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV: additionally	14b	٦	1
15	Did the organization report on Part IX; column (A), line 3, more than \$5,000 of grants or other assistance to or	clia.	છ	3€
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV @? ctelomoo : 224 1.11 Successions II	115	וו	1
16	Did the organization report on!Part IX; column/(A); line:3, more than \$5,000 of aggregate grants or other.			37
\ \	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV. describe also between a	16:		7
, -	• •• •		C	<u>3ε</u>
17,	Did the digamental report a total of more than the jets of expenses in procession in the same of the s	17		
<u> </u>	, and may be a series of the s			70.0
18	bid the organization report more than 410,000 total or land along overtile grows moome and contributions on		dil	الك
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G; Part II an in eanogen is anitation () History in the complete Schedule G; Part II an in eanogen is anitation () History in the complete Schedule G; Part II an in eanogen is anitation () History in the complete Schedule G; Part II an in eanogen is anitation () History in the complete Schedule G; Part II an in eanogen is anitation () History in the complete Schedule G; Part II an in eanogen is anitation () History in the complete Schedule G; Part II and the complete G	₋ 18		✓
c19 -n	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	,		1
r		:19	<u> </u>	t√
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H. T. C. T.	20a	3 (1
	*		C :	1
21.	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	120	ינ	$\overline{}$
		21		1
10 00	demonts described and the first and administration of the companies and the contract of the co		-000	

Part I	V Checklist of Required Schedules (continued)	J		<u>;</u>
٠,	ì		Yes	Nó
	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? If "Yes," complete Schedule I, Parts I and III	22	:	1
	Did the organization answer "Yes" to Part VII; Section A, line 3, 4,3 or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated	, , -) 	ن ،	ē.
	employees? If "Yes," complete Schedule J	23		✓
` ,	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	510 10	2	
	through 24d and complete Schedule K. If "No," go to line 25a () (24a	•	(√
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? :: :tax:	24b	-	
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	[,.	·/
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<u> </u>	7
	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? If "Yes," complete Schedule L, Part I 1	25a	·(·	· /
\	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 Amazara Complete Sched	รก‡ t นูเก 25b		3
26	Did the organization report any amount on Part X, line 5,16, or 22 for receivables from or payables to any	200	-	Ë
V _1	current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L., Part II.	1 *2		1
	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	.26		
_	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
	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):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV, ST DOS	28a	,	1
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete schedule L, Part IV 7 11 (2011) 11 (2011) 12 (2011) 13 (2011) 13 (2011) 14 (2011) 15 (2011) 1	,₁ ₁₁ 28b	ን :	1
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof).	:1 6*	ū	
.*	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	n U	✓
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule Mm. + + + + + + + + + + + + + + + + + + +	30	,-	1
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell; exchange, dispose of, or transfer more than 25% of its net assets? If: "Yes,"	31	7) () ()	12
	complete Schedule N, Part II	321	1 -	<u>\</u>
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
_	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°		C1 3√
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)? [7]	35a	0 /	1
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 7	ա Ի 35b	,*	1
	Section 501(c)(3) organizations. Did the torganization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part Vyline 2 th terms and the Yes, and the organization?	',त• ' 36	(. ~†	31
	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	idi [: 37]	,	ût V
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 2 19? Note. All Form 990 filers are required to complete Schedule O. $\frac{1}{2}$	38·	C	₹ †
Part '				81
\	ε Check if Schedule O contains a response or note to any line in this Part V: 1 1. 9.3 bo 1	• • •	<u> </u>	
	סד בי או ליו ליו ליו ליו ליו ליו ליו ליו ליו לי	-cit t	(Yes	5No
\1a \	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	'		
y c y b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . m. c	, '	ام ا	
	reportable gaming (gambling) winnings to prize winners?	1c	[~
$\overline{}$	CONVACE TO FIRST COLORDA A TEST OF THE SOLUTION OF		. 990	

Part	V teStatements Regarding Other IRS Filings and Tax Compliance (continued) pointile source vo		1.7.	ros.
ولاداعة	שבם יישורים " ה סרי ב סרים. משביר כם וובנית נדים בנו בכר בכבר, חדבור ווף. וח ברוב יל כ ספר חביתו	1-	Yes	No
. 2a	Enter the number of employees reported on Form W-3, Transmittal of Wage, and Tax. Interpreted to the property of the property			
·	Statements, filed for the calendar year ending with or within the year covered by this return 1: 12a) } on in 19vo	, j.	0	
ell b	olf 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)			<u>.</u>
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year? Ed	3a	a	1
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,	٠,		
	a financial account in a foreign country (such as a bank account; securities account, or other financial account)?	4a		1
b	If "Yes," enter the name of the foreign country:	-		
V ,	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			l
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 🚁 👵 o	.5a	71	₩.
_ ∕ b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b 1	-	✓
V C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? The Art	(5c.	<u></u>	1
` 6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ont L	3	3
	rorganization solicit any contributions that were not tax deductible as charitable contributions? 13.1 kg taxing 202	6a .	Ų	.V
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	:41 b	· •	7
-	`gifts were not tax deductible?	6b	ى د	ļ
7 !	Organizations that may receive deductible contributions under section (170(c).3 (a) Lic. (a) Lic. (b) Lic. (c)	'	Ĺ	'
`∀á	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods?			نـــــا
	and services provided to the payor? o	7a	L	.√
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	٠	. '	١,
<u>.</u>	required to file Form 8282?	7c	۲	/
ď	If "Yes," indicate the number of Forms 8282 filed during the year variation is a second of the secon			- <u>-</u> -
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		V
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		10.1	V ;
^и g .	, , , , , , , , , , , , , , , , , , , ,	7g		
`∧ Þ	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	⊥ 7:h	1	31
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? $\frac{1}{2}$ $$	γ'8	ŭ	<u> </u>
\9 .	Sponsoring organizations maintaining donor advised funds: 9 13 1/12 0 17 1960 1 100 0 167 179			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	,	✓
/ þ	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b∶		-
10	Section 501(c)(7) organizations. Enter: 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.			
a	Initiation fees and capital contributions included on Part VIII, line 12 1	L.	, 1	
b .	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities that 10b = 100 10b 100			
1/1	Section 501(c)(12) organizations. Enter:	1		
. ya	Gross income from members or shareholders now to the think to the state of the stat			'
þ	Gross income from other sources (Do not net amounts due or paid to other sources			-
40-	against amounts due or received from them.)	120		-
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year . E. 12b 34 (1.2.5) 55	128	·	•
\ b	Section 501(c)(29) qualified nonprofit health insurance issuers.			i
13		13a		: √
a	Is the organization licensed to issue qualified health plans in more than one state?	10a	- 1	٠.٧
`.				
Þ	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 and the control of the control o	-		
_	· · · · · · · · · · · · · · · · · · ·			
C 140	* ** * ** * * * * * * * * * * * * * *	149	اد دوا	1
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	_	1	▼
-				, 3r
(c) 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?			31 √
	If "Yes," see instructions and file Form 4720, Schedule Norman at 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	135		-
_46	If "Yes," see instructions and file Form 4720, Schedule N.2516 (1) 1 2 2 2 3 2 2 1 2 2 2 2 2 2 2 2 2 2 2 2	110	<u></u>	: V
บ ุ10 ′ ,	If "Yes," complete Form 4720, Schedule O	J11 0	,	.♥
	42 grader in this is a subject of the subject of th	For	990	(2018)

20: State the name, address, and telephone number of the person who possesses the organization's books and records

financial statements available to the public during the tax year.

Del A. Koch, 1010 Sycamore Lane, Columbia, MO 65203 (573) 443-6134

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Form 990 (201													Page I
Part VII			ectors, Ti	ruste	es,	Ke	y E	mpl	oye	es, Highest	Compensated	Employees,	and
•	Independent Co			, rnoto		201	, lin	o io tl	hic I	Part VII			
Section A	Check if Schedule Officers, Directors											· · · · ·	<u>- </u>
1a Comple	te this table for all	persons required	to be list	ed. F	lepo	ort o	com	pens	atio	n for the cale	ndar vear endin	a with or withi	in the
	n's tax year.		tt.		Ŧ	٦.	-) al.		•41	, , , , , , , , , , , , , , , , , , , ,		
	I of the organization									ividuals or org	anizations), rega	rdless of amou	unt o
· r	ion. Enter -0- in colu						_						
	of the organization's												_
	ne organization's five												
	ed reportable comp n and any related org		or Form	VV-2 8	ano/	or I	BOX	(/ OI	го	im 10aa-141120) of more than	2100'nnn itou	n the
-	II of the organization	•	ers. kev er	nolov	ees	. ar	nd h	niahes	st c	ompensated e	mplovees who	received more	thar
	f reportable compen												37}
	II of the organization											tor or trustee o	of the
_	n, more than \$10,000	•	•				-			•	_	-	(vr)
List persor	ns in the following	order: individu	ual trustee	s or	din	ecto	ors;	insti	tutio	onal trustees;	officers; key		-
	ed employees; and f				٠.								įΣ, t.,
☐ Check t	his box if neither the	organization no	r any relate I	a org	anız		on co C)	ompe	ensa	ited any currer	nt officer, directo	r, or trustee.	
	400	1) m	1		•	ution				_	<u> </u>	٠,
-	(A) Name and Title		Average					e than o		(D) _ Reportable	(E) Reportable	(F) _ Estimated	(UI)
	Nano ala Tito		hours per					is both or/trust		compensation	compensation from	amount of	•
•	•	Į,	week (list any hours for	9 2	l ä	Officer	8	野景	Form	from the .	related organizations	other compensation	111
	. !	•	related	률	<u> </u>	ger	eg .	ploy	THE	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the	
	•	1	organizations below dotted	Q E	Institutional	,	Key employee	88		(VV-2/1093-WIGC)		organization and related	1 .
		•	line)	Individual trustee or director	truste	1	8	9	}			organizations	
		F		•	8	l	'	Highest compensated employee		-			(52)
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(1)		•						٠.		1			`
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			·	<u>.</u>		•	41 7					Form 990	(2018)

Part VII Section A: Officers, Directors, Trust	tees, Key E	mplo	yee:	s, aı	nd F	lighe	st C	ompensated E	mployees (conti	nued) IIIVIIIII
				(0	C)				endent Cont	- · · ·
□	1 2i (B) 11 9	יון אחי	6 0	Pos	thon	nse c	υq	conti (a)3 a re	it Schatule O	Cnec
ated Employees eth bas emak						is both	an	Y! Reportable	Reportable E	Sectimated 333
for the calendar year ending with or within the	hours per, i week (list any	office	r and	dad	rect	or/trust		ელი ქალი ქალი ქალი ქალი ქალი ქალი ქალი ქა	compensation from	ta (formulation this
	hours for	우큺	Key emplo Officer of Institutions Individual to or director			Highest employe	질	the	related 7091	XET S. (1 other dubble of the compensation
iduals or organizations), regardless of amount of	t related to		Institutional	Officer	اوو،ا	19 gg	, ∄;	organization u:		e entimon of the
	organizations below dotted	vidual t	<u>ğ</u> ,	701	횽)& 8 2 3 3 4	1.4	(W-2/1099-MISC)	er -0- เก colunii	COT noitszinsgro 1. Er
lefinition of "key employee."	ctic (enil'or	គ្រឹះព	. =	y. '	, Š		'ok	irrent key em	organization's c	
in an officer, director, trustee, or key employee)			truste	b	tae	เมลื่อ	25	rrent highes	szation's five c	* List the orga
n 1099-MISC) of more than \$100,000 from the			ည်း	G S	-W	m 🕏	to	ation (Box 5	rtable compen	who received rep
(15)								zations	ly related organ	organization and c
mpersated employees who received more than	nuinest or	and	es	NO	31:	ונפוץ ו	3,	former office	organization's	• List all of th
(16) .enoi	ต อกตุกกเระ									จาบบ.บบบ or repar
a capacity as a former director or trustee of the	avea, in th	t rec	th.	301	1-1	13 10	210	ormer direct	organization's	• List all of the
ed any related organizations. (71)										organization, inon
ral frustees; officers; key employees; highest	וחשלולעניכ	riote	nit	75	13	usic	l li	den maividu	he foliowing c	List persons in
(18)					\vdash		ns.	ier such perse	oyecs; and ton	compensated emp
ed any current officer director, or trustee.	Banadino	neut	210	ioi	h:	relat	,ne	anization nor	if nolther the or	[] Check this box
(19)	,	(0)	-	-	-	1	1	1		isosam, esmo Ej
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Reportable Reportable Emmaleri (00)	A12 : mil 2	1	7.	: =	1.1	nger.	,		June and Title	
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(21)	1211		-		2 /	2 -2 1,	==	1		
organization (W-2/1093-MISC) from this	इ. १ हु	S P	utitzin	I A	1	rs tor sted		<u> </u>		
(22) 100 (and (10)) 1	1 12 1	21		1 5	3 E	الدوءة ف		i		
enoration i	18	-	d Broc	15		atich	0,33			}
(23)	15.1	Ti	35							<u> </u>
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<u> </u>	† 			li						(t)
(25)		1	i	<u> </u>	Ť		<u> </u>	[
	† †	-	-	li I	l t				•	(2)
1b Sub-total !		.1.	1.	1.	. 1.			<u> </u>		
c - Total from continuation sheets to Part	VII, Sectio	n A	1.	1.	<u>`</u> - -		▶.		_	_ (3)
d Total (add lines 1b and 1c)	1.1.1.	.1.	1.	ţ.	. 1:	•••••	•			
2 Total number of individuals (including but	t not limited	to th	OSE	list	ed	above	e) w	ho received me	ore than \$100,00	00 of (b)
reportable compensation from the organi		1	1	:	1			1		-, as 11 a pmails
	1 1	!	1		1			1		Yes (No
3 Did the organization list any former of	ficer, direc	tor, c	or_tr	uste	ее, [¦]	key_e	emp	loyee, or high	est compensati	ed_
employee on line 1a? If "Yes," complete	Schedule J	for si	úch	indi	ividi	ial	::	Ĺ		3 (7
4For any individual listed on line 1a, is the	sum of re	portal	ble :	COT	npėi	nsatio	n a	nd other comp	ensation from t	he
organization and related organizations	greater th	an \$	150,	000)? h	"Ye	s, "	complete Sch	edule J for su	ch T
Individual	ا. ا. آ.	1.	<u> </u>	!	.].	- :	·	<u> </u>	<u> </u>	4 /
5 Did any person listed on line 1a receive of	r accrue co	ompe	nsa	tion	fro	m any	un un	related organiz	ation or individu	ual (B)
for services rendered to the organization	? If "Yes," c	compl	ete	Sch	redu	ıle J f	or s	uch person	<u> </u>	5 ✓
Section B. Independent Contractors	1 1 1	1	1	1	- 1			1		(6)
1Complete this table for your five highest										
compensation from the organization. Rep	oort compe	nsatio	on f	or th	ne c	alend	lar y	ear ending wit	h or within the o	rganization's tax !)
year.	<u> 1 1, 1</u>	<u> </u>	<u>†</u>	1			,	1		····
(A)			1	1	1-		۱	(B)		(11)
Name and business add	ress		<u> </u>	<u> </u>	_!		ļ	Description of s	ervices	Compensation
<u> </u>	<u> </u>	<u> </u>	1	1	-		-	<u>(</u>		(12)
	1 1	1	<u>; </u>	· 1	_!		\vdash	1		/AL1
1	1 1 1	1 .	1		- [<u>.</u>		(13)
1	 	1	:	+	1		\vdash	7		(14)
2 Total number of independent contractor	rs (includi	na í bi	rt n	ot I	limit	ed to	h th		ove) who	(T1)
@res 09 received more than \$100,000 of compens								10100 40		terrane de la composition della

والها أر

Form 9		Statement of Reve	enue			orne gaseliane.	July a Caller	Pag المالية المالية
, man	سيبح	Check if Schedule C		sponse or note to				
-		<i>"</i>	o contains a roc	, .17	(A)	Related or sexempt income revenue	Unrelated Unrelated Unrelated Unrelated Unrelated) (D) Revenue
स् स	1a	Federated campaigns	s 1a					
irar	ь	Membership dues .	: 1b	\$12,816.00				
s, G	С	Fundraising events .	1c					
Sift	d	Related organizations	s 1d	,				
iE,	е	Government grants (cor	ntributions) 1e		3 1			
Hon	f	All other contributions, g						
Contributions, Gifts, Grants and Other Similar Amounts		and similar amounts not inc	aluded above 1f	\$57,802.30				
d o	g	Noncash contributions include	ded in lines 1a–1f: \$					}
	h	Total. Add lines 1a-1	f	<u> ▶</u>	\$70,618.30	•		• '
Program Service Revenue				Business Code				
3461	2a	Division allocation from			\$28,395.77			
S.	b	Re-imbursement for C			\$3,953.53	Car taken a		
ξ	С	Innovative Project Fun			\$7,500.00		, ევი	שנייהו מרג
Se	d	New Member Commiss			\$45.00		^* . II	7 Ur saler
E	е	Vendor Interface Progr			\$10,510.00	1 ,	1 1 1 1 1 1 1	5 0 0 0 0 5 E
- 6	f_	All other program ser		L			, 11 , , 15	
-	<u>g</u> 3	Total. Add lines 2a-2		landa interest	\$50,404.30	,		1 1 1 1 1 CT
	. 3	Investment income and other similar amo	incinaină aisia	ienos, interest,	440.074.04			
-			•		\$18,674.21	ر	, ;,	130 30 C. 51 11
	4. 5	Income from investmen Royalties	ıı öı tax-exempt b	ono proceeds	4007.00			
	3	noyalues	(i) Real	(ii) Personal	\$927.08			
	6a	Gross rents	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	h	Less: rental expenses						•
	c	Rental income or (loss)						
	ď	Net rental income or	(loss)			٥		.l <u>}</u>
	7a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	1		•	,	f	
	b	Less: cost or other basis		·				۔
•	_	and sales expenses .	194	•				
	С	Gain or (loss)						
	d	Net gain or (loss) .	,	▶				
		•						
ž	8a	Gross income from fu	undraising					
Ž		events (not including \$					r.	,
æ		of contributions reporte	ed on line 1c). 🕙	,				
Other Revenu	-	See Part IV, line 18 .						
ਲ		Less: direct expenses		<u> </u>			<u> </u>	1
į		Net income or (loss) f		events . ►	•	1	7,71,5	C 22
٠,	ya	Gross income from ga See Part IV, line 19 .		ľ				•
			a					
		Less: direct expenses			· · · · · · · · · · · · · · · · · · ·		1	•
		Net income or (loss) f Gross sales of in		ivities P	· · · · · · · · · · · · · · · · · · ·			`
ı	104	returns and allowance]				
	_	Less: cost of goods s		 				
		Net income or (loss) f						<u> </u>
	- 6	Miscellaneous R		Business Code				, ,
	11a			Business Code		,		 ,
	b						, , , ,	10.00
	C						,	ers y
	d	All other revenue .					,	
	_	Total. Add lines 11a-		•			······································	
	12	Total revenue. See in			\$140.624			-

	Statement of Functional Expenses			Bresision	45 1155
Sectio	n 501(c)(3) and 501(c)(4) organizations must com			s must complete co	olumn (A).
	Check if Schedule O contains a respons			<u> </u>	<u> </u>
	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 domestic organizations and domestic governments. See Part IV, line 21	\$1,000.00	\$1,000.00		
2	Grants and other assistance to domestic	V1,000.00	\$1,000.00	· · · · · · · · · · · · · · · · · · ·	
	individuals. See Part IV, line 22	\$46,853.62	\$46,853.62		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
	· · · · · · · · · · · · · · · · · · ·	\$11,313.63	\$11,313.63	· · · · · · · · · · · · · · · · · · ·	•
4 5 _.	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	· .		•	\$1
6 	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		,	1	
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	-			
9	Other employee benefits				0
10	Payroll taxes		· · · · · · · · · · · · · · · · · · ·		
11	Fees for services (non-employees):	,		11 (-
8	Management			•	
b	Legal	,		· · · · · · · · · · · · · · · · · · ·	
C	Accounting	`	•		1
d	Lobbying				r
e	Professional fundraising services. See Part IV, line 17				,
f	Investment management fees				. '
9	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	•			#
12	Advertising and promotion				
13	Office expenses	\$53.00	\$53.00		- ,
14	Information technology	\$10,804.55	\$10,804.55	· · · · · · · · · · · · · · · · · · ·	. `
15	Royalties			, ,	.
16	Occupancy	•		· ·	, ,
17	Travel				, , , , , , , , , , , , , , , , , , ,
18	Payments of travel or entertainment expenses for any federal, state, or local public officials			, r	,
19	Conferences, conventions, and meetings .	\$86,466.51	\$86,466.51	· · · · · · · · · · · · · · · · · · ·	
20	Interest		`*		<u></u>
21	Payments to affiliates			·	
22	Depreciation, depletion, and amortization .				
23	Insurance		· · · · · · · · · · · · · · · · · · ·		, , , , , , , , , , , , , , , , , , , ,
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.)				
_	· · · · · · · · · · · · · · · · · · ·			•	
8	Newsletter (Picogram)	\$31,672.54	\$31,672.54	* **	
þ	Webinar Expenses Officer Training and Travel	\$3,500.00	\$3,500.00		
d	IUPAC 2019 Exhibitor Expense	\$12,397.87	\$12,397.87	· · · · · · · · · · · · · · · · · · ·	-
e	All other expenses Credit card/wire fees	\$2,953.44 \$889.55	\$2,953.44 \$889.55	•••	
25	Total functional expenses. Add lines 1 through 24e	\$889.55 \$219,639	\$219,639	 	
26	Joint costs. Complete this line only if the	₹13,039	₽£ 13,038	, 	7
-	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)				1.7

•

Р	art X	Balance Sheet	on of Nat Assets			机针连
[]		Check if Schedule O contains a response or note to any line in this Pa	equile. O contains X fu	.lo?	Cneekr	. 🗆
100	140,62		פקטת ף (A) עווו, כי שו			Ť
1 4	24 21		Beginning of year to			
516		Cash—non-interest-bearing				4,64 <u>6</u> .10
1.27	(2:a	Savings and temporary cash investments בּ פּתי יוֹן צִּילָ אָ, וּיִחָם בּ starmings and temporary cash investments בּ פּתי יוֹן צִילָּילָ אָ	หากทายอยู่ ขอ รอวกรไปป	121	10 31: 133 13N	4
ا م	∂ 3 ; ૄ	Pledges and grants receivable, net	stactes) on investm			C
	4	Accounts receivable, net	ात प्रकृत भी अबद सि एक	<u> </u>	Donated Sun	Ð
P3 [<u>T</u> 5	Loans and other receivables from current and former officers, directors,			61 30 173 76	-
		trustees, key employees, and highest compensated employees.			स्मित्र । व्य'द्रव	
		Complete Part II of Schedule L (Qualitation of molque) 593	Isd brief to teaces to		•	6
	6	Loans and other receivables from other disqualified persons (as defined under section 5	i to the to escribia	ในวะ		40
.673	05.¥	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary	and the managed and	45 17	2' ' C E	1
						1
Assets		organizations (see instructions). Complete Part II of Schedule Lie. of arm to name	tours o contains a r		LHOS IO	
88	17,4	Notes and loans receivable, net	out cause a ct best	7	Arccunting n	1
•		(Inventories for sale or use . 1587) 1970 A.T 19	TOP OF STANDARD	~8 ·		
	19 10a	Prepaid expenses and deferred charges সহন্দ্ৰ নেটাৰ জনতে এটাইটাৰ কালে Land, buildings, and equipment: cost or	JOHETHI SHI U ÇIL T.	19 2	U FLED TX	
	lua	other basis. Complete Part VI of Schedule D ₁₅ (1 10a siver to heliquido air	i deta i nu i z'no			37
		Less: accumulated depreciation and contents for the notation and the finance doll	וסע לשומא לנו ווס'כמנ			
		Investments—publicly traded securities				2 027 24
		Investments—other securities. See Part IV; line 11% beacondo 6.0.	Consolidaten h:		i Separate i	3,UZ1.34
	13	nivestments—program-related. See Part IV, line און מיא אין אין אין אין אין אין אין אין אין א			Were the org	- Ci
×			ox below to indicat:		tr 'Yus," che	
	•	,•	suldated basic or b		sepuratupas	
		Total assets. Add lines 1 through 15 (must equal line 34) শুত্র নাল্ডা ্রা. ১০	10 traintilous \$697.917	_ : .	\$ J Separate t	560.673
		Accounts payable and accrued expenses: in thirt extribit ability over indited			ni ct'esy t	
		Grants payable 1:00,15 thanning of on Indeprination of statements statements		18:	of the flugit, f	
	19	Deferred revenue assertes at latitude in the top tople, to areading tiplice	Adapted either insign	19	If the chartz	
	20	Tax-exempt bond liabilities		20	o e utenod	
	21	Escrow or custodial account liability. Complete Part IV of Schedule Diagno		:21,	As a result o	2a
S,	22	Loan's and other payables to current and former officers, directors,		16	A COULSON	1
3	•	trustees, $\mathfrak{g}_{\mathfrak{p}}$ key $\mathfrak{g}_{\mathfrak{p}}$ employees; whighest \mathfrak{g} compensated \mathfrak{g} employees, \mathfrak{g} and \mathfrak{g}		٠.	tob 'eu' 1	4
Liabilities		disqualified persons. Complete Part II of Schedule Edinbath hng O all bodo	aits, explain why in C	22	required audi	
	23 G	Secured mortgages and notes payable to unrelated third parties		23		
	24	Unsecured notes and loans payable to unrelated third parties		24		
	25	Other liabilities (including federal income tax, payables to related third			ĺ	
		parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D				
		· · · · · · · · · · · · · · · · · · ·		25 26	 	
-	26	Total liabilities. Add lines 17 through 25		20	-	
S		complete lines 27 through 29, and lines 33 and 34.				ĺ
Š	27	Unrestricted net assets		27		
88	28	Temporarily restricted net assets		28	-	
8	29	Permanently restricted net assets		29		
5		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and				
ř		complete lines 30 through 34.				ŀ
8	30	Capital stock or trust principal, or current funds		30		
se	31	Paid-in or capital surplus, or land, building, or equipment fund	· · · · · · · · · · · · · · · · · · ·	31		
As	32	Retained earnings, endowment, accumulated income, or other funds .	'.' .'-''	32		
Net Assets or Fund Balances	33	Total net assets or fund balances	\$697,917	33	\$!	560,673
	34	Total liabilities and net assets/fund balances	\$697.917			560.673
					Form 9 9	

Part	XI Recor	nciliat	ion of Net Assets	399	e She	Balanc	- 25	312 3
11.	Check	if Sch	edule O contains a	response or note to any line in this Part XI mistros. O altro				
1	Total revenu	e (mus	st equal Part, VIII, co	umn (A), line 12)	1		\$140,6	<u></u> 23.89
2 18	Total expens	ses (m	ust equal Part IX, co	lumn (A), line 25)	2		\$219,6	39.15
01,3.5,				2 from line 1				9,015
4	Net assets o	r fund	balances at beginni	ng of year (must equal Part X, line 33, column (A)) جے جے وہ	34 11	Savras a	\$ 697,9	17.27
5	Net unrealize	ed gair	ns (losses) on invest	ments	1:5):	Plednes r	-\$53,5	20.61
6	Donated ser	vices a	and use of facilities	able not to the second	1≤6 ≥	Accounts	4	ī
7	Investment e	expens	ses	ר ושכה! ערב דב לים ת העדיתה ליפום למדייפר סלוסיצפי טיפהיסות.	~ 7 .	Loans an	-\$4,70	07.96
8	Prior period	adjust	ments	employaet, land in phemiliconnochisted, on plotocal	184	tru3*6±3,		•
9	Other chang	es in r	et assets or fund ba	lances (explain in Schedule O)	P e t	Complete		1
10				year. Combine lines 3 through 9 (must equal Part X, line 🚜			9	ł
	33, column ((B)) .	<u> </u>	disciplination of the distribute and proceedings and a	,10·	493E7K11)	\$560	<u>0,673</u>
Part				zations of scutton 501;c)(a) volunity employees' ber gnifroge				
	Check	if Sch	edule O contains a	response or note to any line in this Part XII ກ ວ. ໂຂກວຽນກຸນສຸນ	s (tec	ئەدەغەر ئىر. ئىل		<u>' </u>
		7		receivable, net				Nó
1				e Form 990: Cash Accrual Other . sau no els			8	` >
			changed its meth	od of accounting from a prior year or checked "Other," ex		1 *	8	Ì
	Schedule O.		1	and equipment cost or		, ———	151	
2 a	_			ments compiled or reviewed by an independent accountant?			1	√
	If "Yes," che	eck a	box below to indic	ate whether the financial statements for the year were com-			d	'
027.31	reviewed on	a sep	arate basis, consolic	lated basis, or both:			1	'
				basis , Both consolidated and separate basis , Both consolidated and separate basis			[القدا	<u>. </u>
<u> b</u>		·		ments audited by an independent accountant? befale:-manpon			1 1	<u>(/</u>
				te whether the financial statements for the year were audit		71 .	:4)
<u> </u>			nsolidated basis, or				15	;]
				basis . Both consolidated and separate basis at the solidated and separate basis at the solidated and separate basis.			E_	1
c				anization have a committee that assumes responsibility for or			1	i
				ts financial statements and selection of an independent account		• • —	81	 -
	Schedule O.		changed either its o	oversight process or selection process during the tax year, ex	•			
			donel event vice 4h	d liables	,		<u>05</u>	┯┵
38				e organization required to undergo an audit or audits as set A-133? אינו אינות ליינות בריים בריים ליינות בריים ברי			1 1	t √2
h				the required audit or audits? If the organization did not under				
				Schedule O and describe any steps taken to undergo such a				Tallian Tallian
		23	i	ges and notes payable to unrelated third parties				
		24		s and loans payable to unrelated third parties			24	1
		+	 	(including federal income tax, payables to related third				İ
				incloding forestar around ear, payables to related that or labilities not included on lines 17–24). Complete Part X			w	
		25				of Schedu		i
		28	 	Add lines 17 through 25			26	1
		1	 	that follow SFAS 117 (ASC 958), check nore ▶ _ and				† –
•				27 through 29, and lines 33 and 34.				5
		27	1	1		Uniestricti	27	ä
	· 	23	 	Incred net assets		,	28	Į į
		29		Incled net assets			29	5
		-		at du not fo'low SFAS 117 (ASC 95a), check here > and				15
		1	i i	0 th ough 34.				1 7
		30	1	trust principal, or current funds		-	30	18.
	· · · · · · · · · · · · · · · · · · ·	176		if projus, or land, building, or equipment fund			31	12.
	,	32	† 	gs, endowment, accumulated income, or other funds.			32	¥ 43
500,673	2		\$697,917	or fund batances			33	Het Assets or Fund Balances
200 67			cre reas	nd net asse s/tund balances			34	L -
	20 m. i							

SCHEDULE A (Form 990 or 990-EZ)

(d) 27 1 6 17 Public Charity Status, and Public Support 1: 15 1750

OMB No.: 1545-0047

Department of the Treasury

· I Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ம் விழார்க் அடி அம் ► Attach to Form 990 or Form 990-EZ. ு. மு.

Open to Public

Internal Revenue Service ▶ Go to www.irs.gov/Form990 for instructions and the latest information. hogaui १९२ (व. . Name of the organization: () はでは、 ding Employer identification number. コルカナルコン ามสำ¹ ก.ส. **51-0193197** .สุ.ส์ Division of Agrochemicals (AGRO), American Chemical Society Reason for Public Charity Status (All organizations must complete this part.) See instructions. Julia is The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 👃 39 - 100 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 173 18 11 3 10 15 20 15 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). I to an analysis of the arrival of the 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: ters of a vicyes and introduct 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.) Tot Livide & this 53. 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.) An agricultural research organization described in section 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 10 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 331/2% 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). p. c 🗼 😞 🔾 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. 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 4. supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having 01 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. . . / h: 4 n - -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. die 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. noticings and resident functionally integrated, or Type III non-functionally integrated supporting organization of agents and house and new contractionally integrated. f "Enter the number of supported organizations it.d. it that the number of supported organizations it.d. it. 网络字形片 rove at optere. The crane Provide the following Information about the supported organization(s). # (i) Name of supported organization in 12 COLUMN EIN SHAIL (iii) Type of organization. (iv) is the organization (v) Amount of monetary TU- (vi) Amount of listed in your governing support (see; ata (described on lines 1-10) a other support (see -4 1 51 64 10 t document? above (see instructions)) instructions) instructions) 11 77 1(7 to 16b) 36 1 c 14 6 "טרוב בשליטול מולכת חב te: t -- 2018 guns, mirguis-un 10 o-factr this bod a "stop hore Exclusing 3.Yes 1 No E need of the order ವ ಅತ್ಯಾಧಕರನೆ 10,5 or 1 c buthage is yield in hish edite as no こもついじょ ふいしつ 107 IV F J4 (A) マ מיזרשו ב, זכ (B) the air of the collection of the tr " .T. C :-- t 31 201 - 201 3 * 1. 1 h ... into . soustance io-br on a or or perfer at a per 57(0). that a thurst and atom here. dimin the ומ זייו. ושבינו נווש בו ש ינ ווצר אים 1 15 2 15 20 6 2 KOT U Br 11 . 1. st. h לכינים מאייו יווחים it us. 30 4.21 ania cut i or' . / tr + f' mag 's J 53*16 7000 neder ran Ja (6h, 1 a o 1 L c leuf (nic box), dicu Ch a. J. on 173 13, 7-14-2316". Private ion of those of the orga (D) 🗸 are to the tark (E)? (\$23-0 F to 0.50 mm)) 1.50 mb 1

Part								
	(Complete only if you checked the						alify und	er ´
	्रि पPart III. If the organization fails to	qualify unde	er the tests lis	sted below, p		te Part III.)	· ·	
		to the let	Lun re-ci L im		. 0) . 1			
Calen	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018 · "	∹ (f) ·Tot	al "
. 1	Gifts, grants, contributions, and		- -		, ,	- '- I	1,1	
	membership fees received. (Do not		11. 4	1 200	Mar Death	S William >	1 (<i>r,</i>
	include any "unusual grants.")	1. 1. 10 . 10 . 1. 10 . 10 . 10 . 10 .	1 1 1	, , , , , , , , , , , , , , , , , , , ,	C I C A			
2	Tax revenues levied: (afor that name	rc1.1 " 3	3 , 1. tr	ر در د	garage Berg	1	19 1 1	•
	organization's benefit and either paid	ي يدومر	12° 31 - 22° 31	11 -)(A)1.)(C)1	ľ	5 2,6%	J. 1/.	2
	to or expended on its behalf with the	E 17 15 . 30	_		ati nore			
3	The + value) of (services x or r facilities	י וטים קנון	ירני זי	Q + E5 %	o topicari ari 1	1 - 1 - 2 - 2	52.13	<u> </u>
•	furnished by a governmental unit to the				1 1 10 6	r (T) 3/1	4 9 +	•
•,	organization without charge	+ + -	CF	10 70 70 71		/	376	8
4	- ·			11 *	- 4		12.	
4	Total. Add lines 1 through 3				, , , , , , , , , , , , , , , , , , ,			
5	The portion of total contributions by	,	' '				भी व	6
)^	each 🖰 e person 🕫 (óther 🗀 than 🐪 a	1	,			. '	- 3°	`
	governmental unit or publicly				1/	,,	2~~0	
	supported organization) included on		C fift			(4)	no / i	8
	line 1 that exceeds 2% of the amount	C 1	15 cm	,	. /		En3	3
	shown on line 11, column (f) . 😓 হ্বেক্স				<i>.</i> .	•	ນ 10	
6	Public support. Subtract line 5 from line 4	<u> </u>					3 , , ,	
	on B. Total Support 🧸 ดูแลและกระเ	,			J. 1 1 1170		L'A'	or
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2014′ <u></u>	(b) 2015."	(c) 2016	(d) 2017 , '	(e) 2018´,_	്, (f) Tot	al
7	Amounts from line 4 . AB. t als.gr	JO. 187613(2			the interest	you tyst a	11.0	
8	Gross income from interest, dividends,	to salim	not to do to	Lis Letter	אוובל ליני ביי	ga their	D 114	rr
11 3	payments received on securities loans;	afit of, to part	יש אווש טו	المنافع الماء أ	מחומנים בידם פק	יושה בשלוסח בי נ	i, An c	12
./.)/ <mark>(</mark> 6)3	،rents; aroyalties, ۶) and كاincome به from (Ection CD9'	if worder a	with of the f	hogen fall	Le that	10 to	
F ' ' '	similar sources (1, product in the stage	ore nor qual-	u 1 / 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 /	1.7	g · te	וויבי יין	70. a	
9.	Net vincome from unrelated business	, - t , t - 1000	17 3/1 30	775	Ban of 1 72.	gr. Adequ	· _ (
,	activities, whether or not the business	10.1.1	. /n ~ m	ì	inno - E	1	1	
	is regularly carried on		1/0 111100.	Philippa t un		יטשעית הם ביט.		
1015	Other, income. Do not include gain or	10/2001-00 1/	1511 (12) D.E.			GQL / A JH JQV		d
	loss from the sale of capital assets	d. , 9. 1/0	5	l .		1 ofte : 0 : 1115		•
٠,٠	(Explain in Part VI.)		Į.	l .	צטע מער בסי		_	
44 /1	Total support. Add lines 7 through 10	1/ 1		·	,	, ,	. 1	
12	Gross receipts from related activities, etc	(see instruction	nne). Buzf (•			<u> </u>
	First five years. If the Form 990 is for the							2/
	organization, check this box and stop he							?)
	on C. Computation of Public Suppor							
								- 0/
14	Public support percentage for 2018 (line							3 %
15	Public support percentage from 2017 Sci					15		<u>%</u>
16a	33¹/a% support test—2018. If the organ							_
	box and stop here. The organization qua							` ⊔
D _.	331/3% support test—2017. If the organi					is 33'/3% or m	ore, chec	_
r	this box and stop here. The organization	'_n	To J. On	•				L
17a	10%-facts-and-circumstances test-2							
	10% or more, and if the organization me							
	Part VI how the organization meets the '	facts-and-circ	umstances" te	st. The organi	zation qualifies	s as a publicly	supporte	$d_{[U,V]}$
_	organization/	· · . · <u>-</u> ; . · .				<u></u>	•	, [
b	10%-facts-and-circumstances test-2	017. If the org	anization did r	not check a bo	x on line 13, 1	6a, 16b, or 17	a, and lin	e,9)
	15 is 10% or/more, and if the organization	ation meets th	e "facts-and-c	circumstances	" test, check t	this box and s	stop here	3. `−′
	Explain in Part VI how the organization r	neets the "fac	ts-and-circum:	stances" test.	The organizati	on qualifies as	a publicl	y _{ια} ,
	supported organization		<u>.</u> .				>	, "
18	Private foundation. If the organization di	id not check a	box on line 13	, 16a, 16b, 17a	ı, or 17b, chec	k this box and	see	. –
	instructions						>	- ' 🗀
					Sch	edule A (Form 996	0 or 990-EZ	2018
								1-1
	/	-			• •			ا دار
C2 /	(6.) 15) 15 (1.) 15 (1.)		F (73 (3)		3 2 2		-,,,,	11

Part	Support Schedule for Organiza (Complete only if you checked the						der Part II
	If the organization fails to qualify						ider rait II.
Secti	on A. Public Support	714)].				11.	:
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016 ···	(d) 2017.7	'. '(e) 2018 '	i (f) Totál
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")			04.700	400.004	70.640	074.450
2	Gross receipts from admissions, merchandise	486,949	126,568	81,792	108,231	70,618	874,158
-	sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	١,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· 1		اه	, r	ч
3	Gross receipts from activities that are not an unrelated trade or business under section 513		•		٠, ٠	` ;	
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	1	·				
5	The value of services or facilities furnished by a governmental unit to the organization without charge	٠					1
6	Total. Add lines 1 through 5	486,949	126,568	81,792	108,231	70,618	874,158
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .			•			, F
b	Amounts included on lines 2 and 3			Ç		,	
	received from other than disqualified	•	• 1		•		
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year		* '1	.	•		
С	Add lines 7a and 7b	,		•	,		
8	Public support. (Subtract line 7c from line 6.)						874,158
Secti	on B. Total Support				,		
	dar year (or fiscal year beginning in) 🕨	(a) 2014 ·	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6 : :	486,949	126,568	· 81,792	108,231	70,618	874,158
10a	Gross income from interest, dividends, payments received on securities loans, rents,	,		• • ,			
	royalties, and income from similar sources .	19,824	19,068	42,955	91,815	- 19,601	193,263
b	Unrelated business taxable income (less section, 511 taxes) from businesses acquired after June 30, 1975			•	שני בי	i iii to ga	internal of the second
С	Add lines 10a and 10b	19,824	19,068	42,955	91,815	19,601	193,263
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.)		445	,	~ 1		4 007 404
14	First five years. If the Form 990 is for the	506,783	145,636				1,067,431 n 501(c)(3)
174	organization, check this box and stop he						
Secti	on C. Computation of Public Suppor				4 •		
15	Public support percentage for 2018 (line 8			13. column (f))		15	82 %
16	Public support percentage from 2017 Sch					16	84 %
	on D. Computation of Investment In			<u> </u>			
17	Investment income percentage for 2018 (y line 13, colu	mn (f))	17	18 %
18	Investment income percentage from 2017	7 Schedule A, I	Part III, line 17			18	16 %
19a	331/2% support tests—2018. If the organ 17 is not more than 331/2%, check this box	ization did not	check the box	on line 14, ar	nd line 15 is "m		
b	331/2% support tests—2017. If the organization 18 is not more than 331/2%, check this	zation did not c	heck a box on	line 14 or line 1	9a, and line 16	is more than 3	13¹ദ%, and
20	Private foundation. If the organization di						

	ile A (Form 990 or 990-E-2) 2018		•	Page 4
Part				+
	(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete			Α΄
	and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, c			<u>.</u> .
	Sections A, D, and E. If you checked 12d of Rart I, complete Sections A and D, and complete F	<u>'art' V</u>	<u>)</u> . π.	· a
Secti	ion A. All Supporting Organizations தமு ஆட்டிய வடுக்கு கூடுகள் அண்டிரு கூடிய ஆ	<u>J) 160</u>		
	υ,		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? 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.	1	ļ	
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported		*	
_	organization was described in section 509(a)(1) or (2).	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer	,		
	(b) and (c) below.	3a	· ·	↓
þ	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)? If "Yes," describe in Part VI when and how the			
	organization made the determination.	3b		
C	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	<u>3c</u>	L	
48	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		—
þ	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign	١ ٠		
	supported organization? 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.			
		4b	ļ	
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)? If "Yes," explain in Part VI what controls the organization used		1	
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)		ł	١.
	purposes.			:
-		4c	⊢.	┿
	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," arrawer (b) and (c) below (if applicable): Also, provide detail in Part VI, including (i) the names and EIN.	1		1
	χ numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;		ľ	"
•	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action			1
	was accomplished (such as by amendment to the organizing document).	5a	[
ь	Type I or Type II only. Was any added or substituted supported organization part of a class already	- 3a		+-
	designated in the organization's organizing document?	5b		
С	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	ł		ŀ
	by one or more of its supported organizations, or (iii) other supporting organizations that also support or		ł	
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		i
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			1
	(as 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? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?			
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	. 8	ر ر	
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))? If "Yes," provide detail in Part VI.	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? If "Yes," provide detail in Part VI.	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? If "Yes," provide detail in Part VI.	9ċ	١	1
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section			1
•	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			.
	supporting organizations)? If "Yes," answer 10b below.	10a		1

b¹ Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

Part	Supporting Organizations (continued)	-		
	and the second of the second o		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	'A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	J		
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b	٠, د	
	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.	11c		ç
	on B. Type I Supporting Organizations			_
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to the power			110
- •	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	١.		l
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	1		'
	controlled the organization's activities. If the organization had more than one supported organization,		- ,	ł
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	1		۱. ا
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	14	.0.	-` -
	District the second for the bounds of an area of the second and area for the second and area of the second area.	 -		-
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	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,			i .
	supervised, or controlled the supporting organization.	-		
		2	· '	
Section	on C. Type II Supporting Organizations	r h		
	t · · · · · · · · · · · · · · · · · · ·	·	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		¥\$ 4	
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1 :		
Section	on D. All Type III Supporting Organizations		1 -	٠,
	orani kalendari kalendari kalendari kalendari kalendari kalendari kalendari kalendari kalendari kalendari kale	<u> </u>	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		<u> </u>	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	- 1	L
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	1 1	•	
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		ļ
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	i .		1
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	l i		
	supported organizations played in this regard.	3		l'
Section	on E. Type III Functionally Integrated Supporting Organizations	. , ,		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstru	ctions	s).
a	☐ The organization satisfied the Activities Test. Complete line 2 below.		,, e, T	
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 ins	structi	ions).
2	Activities Test. Answer (a) and (b) below.		Yes	
	A B AND AND THE RESERVE AND AND AND AND AND AND AND AND AND AND			
≀ स्त्र -	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	; }		
				l i
	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.			ئـــــا ، ز
_		2a		
Ь	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	, l	.	, ;
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			1
	reasons for the organization's position that its supported organization(s) would have engaged in these			[]
	activities but for the organization's involvement.	2b		İ
3	Parent of Supported Organizations. Answer (a) and (b) below.			-
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	<u> </u>		[]
	trustees of each of the supported organizations? Provide details in Part VI.	3a		1
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.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functional Part V Type III Non-Functional Part V Type III Non-Functional Part V Type III Non-Functional Part V Type III Non-Functional Part V Type III Non-Functional Part V Type III Non-Functional Part V Type III Non-Functional Part V Type III Non-Functional Part V Type III Non-Function Part V Type III Non	jani	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying) tru:	st on Nov. 20, 1970 (explain	in in Part VI). See
instructions. All other Type III non-functionally integrated supporting organ	izat	ions must complete Section	ons 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):			
a Average monthly value of securities	1a	e hour	the first of
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	The Company of the Co	1
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		٠.
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 1.1	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. 1.
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-functional instructions).		iegrated Type III supportin	g organization (see

Part	V , F Type III Non-Functionally Integrated 509(a)(3	B) Supporting Organi	izations (continued) o	Supplemental Supplement
,U's t	le, 5a, 6, 9a 9b, 9c 11a, 11b and เปิด อาส เห ระโยก D. แบร 2 ยกป 3, Purt IV, Section E, เพียง 1c, 2	na Chine it Pari Nobel	ONCES 'ALBELL'' DUE	1 55(H) ,CI
.310	Amounts paid to supported organizations to accomplish	exempt purposes ^{790,7}	i, mart v, ime i, mart	उत्त, साधि र
_2.	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	mpt purposes of suppo	orted "Noo oar o ona	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets			· · · · · · · · · · · · · · · · · · ·
5			•	<u></u>
6	Other distributions (describe in Part VI). See instructions.			
			· · · · · · · · · · · · · · · · · · ·	
	Total annual distributions. Add lines 1 through 6.	1 41 . 1		
8	Distributions to attentive supported organizations to whic (provide details in Part VI). See instructions.	n the organization is res	sponsive	
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sect	ion E—Distribution Allocations (see instructions)	(ī) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6	<u> </u>	· · · · · · · · · · · · · · · · · · ·	
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
а	From 2013			
b	From 2014			
	From 2015			
d	From 2016			
e	From 2017			
	Total of lines 3a through e			······································
	Applied to underdistributions of prior years			
	Applied to underdistributions or prior years Applied to 2018 distributable amount			
<u></u>	Carryover from 2013 not applied (see instructions)			
<u> </u>				
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.	-		
6	Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		-	· ·•
7	Excess distributions carryover to 2019. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2014			
b	Excess from 2015			
	Excess from 2016			
d				
				<u> </u>
e	LAUGOS HUIII ZUTU	<u> </u>	A-1	A (Fa 000 a 000 FM 0040
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Part VI	Supplemental Informati III, line 12; Part IV, Section B, lines 1 and 2; Part IV, 3a, and 3b; Part V, line 1; lines 2, 5, and 6. Also con	on A, lines 1, 2 Section C, lin Fart V, Secti	2, 3b, 3c, 4b, e 1; Part IV, 3 ion B, line 1e	4c, 5a, 6, 9a Section D, lin ; Part V, Sec	a, 9b, 9c, 11a, 1 nes 2 and 3; Pa ction D, lines 5,	1b, and 11c; P rt IV, Section E, 6, and 8; and P	art IV, Section lines 1c, 2a, 2b,
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SCHEDULE O	Supplemental Information to Form 990 or 990	
(Form 990 or 990-EZ)	স্কুটা লেখু সাল্য Zomplete to provide information for responses to specific question form 990 or 990-EZ or to provide any additional information.	ZU18
Department of the Treasury nternal Revenue Service	► Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information.	Open to Public Inspection
Name of the organization		Employer identification number
Division of Agrochemi	cals/American Chemical Society	51-0193197
Form 990 Part VI, Line	9): Officers' names and mailing addresses	
Division Chair: Julie E	ble, Eble Group LLC, 1368 Brookstone Drive, Grant Valley, PA 19060-1746	
/ico Chair: Leah Riter,	Bayer Crop Science, 800 North Lindbergh St. Louis, Missouri 63167	
Program Chair: Chery	Cleveland, BASF Corporation, 26 Davis Drive, Research Triangle Park, NC 277	09-3528
「roasurer: Del Λ. Koch	, 1010 Sycamore Lane, Columbia, MO 65203	
Secretary: Sharon Pap	iernik, USDA-ARS North Central Agricultural Research Laboratory 2923 Medan	y Ave. , Brookings, SD
Form 990 Part VI, Line	s 6 and 7a): The organization has members, from which the governing body is	chosen by an at-large vote.
Form 990 Part VI, Line	19): "No documents available to the public."	
		<u>-</u>

Schedule O (Form 990 or 990-EZ) (2018)			to have been	'	······································	Page
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