Form

(Rev. January 2020)

(200 p)	294907900 294907900	427101
Return of Organization Ex	empt From Income Tax	OMB No. 1545-0047
Under section 501(c), 527, or 4947(a)(1) of the inter	-	2019
▶ Do not enter social security numbers of	in this form as it may be made public. $ {\cal Q}({\cal V}) $	Open to Public
▶ Go to www.irs.gov/Form990 for inst	ructions and the latest information. $ V $	Inspection

		the Treasury		aal security numbers on			1910	Open to Public Inspection			
	nal Revenu		<del></del>	gov/Form990 for instru			<i>V</i> (1				
			tar year, or tax year beginni		, 2019, and end	ng	Y	,20			
B	Check if a	pplicable:	C Name of organization Plast.	Conference, Inc.			D Employ	er identification number			
□.	Address o	hange	Doing business as		<del></del>		<b> </b>	06-1416006			
	Name cha	inge	Number and street (or P.O. bo	x if mail is not delivered to sh	reet address)	Room/suite	•	ne mumber			
	Initial retu	m	297 Clarksville Road		l			609-750-9899			
	Final retur	n/terminated	City or town, state or province		postal code		]				
	Amended	return	West Windsor, New Jersey	y 08550			G Gross n				
	Applicatio	n pending	F Name and address of principal	officer:	_ (			abordinates? Yes V No			
			L		——— <u>—</u>			included? Yes No			
		pt status:	√ 501(c)(3)	) ◀ (insert no.)	4947(a)(1) or 527			. (see instructions)			
		► www.pla				H(c) Group	<del></del>				
_				ciation ☐ Other▶	L. Year of ton	nation: 1985	M State o	f legal domicile: NY			
Pa	art I	Summa						<del></del>			
_	,	•	cribe the organization's mi								
5			couting Organizations. Funds				nps and su	pport organizational			
Ē			also publish periodicals and t		<del></del>						
Activities & Governance	1		box ► ☐ if the organization		•	ed of more than	1 1				
Ğ	1		voting members of the go	T	=	<u></u>	3	12			
45			independent voting memb		- •	b)	4	12			
₽	ı		ber of individuals employed	•	(Part V, line 2a)	٠ .: ٠ .	<del>/15</del> 1	0			
훓	i .		ber of volunteers (estimate			1.000	18	0			
₹	l .			d business revenue from Part VIII, column (C), line 12							
	Ь	Net unrela	ted business taxable incon	ne from Form 990-T, li	ne 39 (- 12-6-1	<del></del>	7b	0			
					-	Prior Yes		Current Year			
9	١.		ons and grants (Part VIII, lir	•		6	4,347.40	141,362.71			
Revenue	9	Program s	ervice revenue (Part VIII, lir	ne 2g)			2,526.40	33,253.89			
Ž	10 1	investmen	t income (Part VIII, column	(A), lines 3, 4, and 7d)		10	0,113.64	13,456.14			
-		Other reve	nue (Part VIII, column (A), i	ines 5, 6d, 8c, 9c, 10c,	, and 11e)		0	200.25			
	12	Total reven	ue-add lines 8 through 11	(must equal Part VIII, o	column (A), line 12)	9	5,987.44	188,272.99			
	13	Grants and	i similar amounts paid (Pai	rt IX, column (A), lines	1–3)		0	0			
	14	Benefits pa	aid to or for members (Parl	t IX, column (A), line 4)		L	o o	0			
8	15	Salaries, ot	ther compensation, employe	e benefits (Part IX, colu	mn (A), lines 5-10)		0	0			
Expenses	16a	Profession	al fundraising fees (Part IX	, column (A), line 11e)		L	0	0			
ğ	b '	Total fundi	raising expenses (Part IX, o	column (D), line 25) 🕨							
ш	17	Other expe	enses (Part IX, column (A),	lines 11a-11d, 11f-24d	3)	8:	2,709.27	100,450.22			
	18	Total expe	nses. Add lines 13-17 (mu	st equal Part IX, colum	n (A), line 25) .	8	2,709.27	100,450.22			
		Revenue k	ess expenses. Subtract line	18 from line 12	<u> </u>	14	1,278.17	87,822.77			
, 88 8 0	]					Beginning of Cur	rent Year	End of Year			
콯틆	20	Total asset	ts (Part X, line 16)	<i></i> .		53	1,779.23	619,602.00			
智	20 21 22	Total liabili	ities (Part X, line 26)				0	0			
Ž	22		or fund balances. Subtrac	t line 21 from line 20	<u> </u>	53	1,779.23	619,602.00			
Pá	art II	Signatu	re Block								
			, I declare that I have examined th					knowledge and belief, it is			
TU-	e, correct,	and complet	e. Declaration of preparer (other th	Tan Officer) is based on all Ire	ormation of which prepa	erer has any knowle	age.				
٥.				7/1/		1		<del></del>			
Sig	_	Signati	ure of othicer	(1/		Date		1			
He	re		Xolle 1				11/	PAYZOZO			
		Type o	r print name and title	7	ROHOAN J'JA	wycky lea	Miric	<u>e</u>			
Pa	id	Print/Type	busines, a usus	Preparer's signature		Date	Check [	) a PTIN			
	eparei	-					self-emplo	yed			
	e Onh	1	ne >			Firm	SEIN►	·· <del>-</del>			
		Firm's add	tress >			Phor	e no.				
Ma	y the IR	S discuss t	this return with the prepare	er shown above? (see i	nstructions)			CEILLYESNI CHORES			
For	Paperw	ork Reduct	tion Act Notice, see the sepa	erate instructions.	Car	L No. 11282Y	<b>~1</b> '"	IRS Form 3990 (2019)			

OCT 21 2020

OGDEN, UTAH

om 996	D (2019) Page 2
Part I	Statement of Program Service Accomplishments  Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	To assist the development and growth of the worldwide Plast Ukrainian Scouting Organizations. Funds are directed at programs to train counselors, develop scout camps, and support organizational efforts. We also publish periodicals and training material for scouting members
	and counselors.
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	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code: 1 ) (Expenses \$ 25,505.00 including grants of \$ ) (Revenue \$ 33,253.89)
	Publication of periodicals for Plast scouting members.
	**************************************
4b	(Code:2) (Expenses \$16,020.00 including grants of \$) (Revenue \$)
	Donations to the Plast Ukrainian Scouting Organization headquartered in Kiev Ukraine to help defray general operating expenses associated
	with managing several country-wide summer camps as well as purchasing needed scouting equipment and supplies.  from dues received from the world-wide Plast Scouting Organizations (including Ukraine) which totaled US\$ 33,783.27 in 2019.
	The does received their the work-wide Press Scooling Organizations (Residuing Orlanie) which to take to Code 35,7 65,27 to 2015.
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)
40	(Expenses \$ including grants of \$ ) (Revenue \$ )  Total program service expenses \$ 41.705.00

Form 990 (2019)

ABF) D

### Part IV Checklist of Required Schedules

			res	LEO
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	J	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	J	<del></del>
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		1
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		,
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, 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		J
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		1
þ	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
C	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		J
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		J
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		7
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
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		1
13 140	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  Did the organization maintain an office, employees, or agents outside of the United States?	13		<u> </u>
_	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	14a	<b>\</b>	
_	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		J
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	,	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		<b>&gt;</b>
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		J
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
_ b	If "Yes" to fine 20a, did the organization attach a copy of its audited financial statements to this return?	20b		1
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1

Part	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? 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 employees? If "Yes," complete Schedule J	23		1
24a	The state of the s	24a		1
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		1
	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		1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		1
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	<b>25a</b>		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		J
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	<u> </u>	J
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):	<u>s'</u>		ب ج
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		,
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		1
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? 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		1
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	<u> </u>	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		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	<u> </u>	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	35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	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? <b>Note:</b> All Form 990 filers are required to complete Schedule O.	38	1	
Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			. <u> </u>
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	100	35	194.0
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		1	5
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gamling (gambling) winnings to prize winners?	1c	√ (₹.)A	

Part	Statements Regarding Other IRS Filings and Tax Compliance (continued)									
			Yes	No						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1	** **	9.5						
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0		منته	4						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		_65						
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see Instructions)									
	Did the organization have unrelated business gross income of \$1,000 or more during the year?									
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O .	3b								
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			_						
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<u>4a</u>		<b>1</b>						
b	If "Yes," enter the name of the foreign country ▶	\$0.5E	, 5°							
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		تستا							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1						
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b								
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c								
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1						
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6Ь								
7	Organizations that may receive deductible contributions under section 170(c).	1	~ qu/4							
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	36	5.00	1						
	and services provided to the payor?	7a		<u> </u>						
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>						
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	1_								
	required to file Form 8282?	7c		. (0, 7)						
d	If "Yes," indicate the number of Forms 8282 filed during the year	3. C.	-200	<u>بري</u> ر						
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		1						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<b>  •</b>						
9 h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	<del> </del>	<del> </del> -						
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		22 7	P. Ball						
8	sponsoring organization have excess business holdings at any time during the year?	8		استقامها						
9	Sponsoring organizations maintaining donor advised funds.	5 40	PUN	LEN						
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	,25							
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b								
10	Section 501(c)(7) organizations. Enter:	13 p#	ф·;	230						
а	Initiation fees and capital contributions included on Part VIII, line 12		Designation of	6.7						
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	12.300	\$	3.4						
11	Section 501(c)(12) organizations. Enter:	7 4		20 2						
а	Gross income from members or shareholders	J, " )	<i>a</i> ,	1						
b	Gross Income from other sources (Do not net amounts due or paid to other sources	130	8							
40	against amounts due or received from them.)	£.	-8-	100						
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	160	3241						
13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year [12b]	阿	<i>\$</i>	3.7						
is a	Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?	13a		Land						
q	Note: See the instructions for additional information the organization must report on Schedule O.	134	700-	44						
Ь	Enter the amount of reserves the organization is required to maintain by the states in which	Circle 1	3	- 5						
	the organization is licensed to issue qualified health plans	The second	1							
c	Enter the amount of reserves on hand	183	, 🕏	4						
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<del>                                     </del>	-3.5						
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b	<del>                                     </del>	<del>                                     </del>						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or		<del> </del>	<del>                                     </del>						
	excess parachute payment(s) during the year?	15	1	1						
	If "Yes," see instructions and file Form 4720, Schedule N.	32	6.Z	132						
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	ALL PARK	, Risks '						
	If "Yes," complete Form 4720, Schedule O.	yo	**************************************	1						
		Fon	n <b>99</b> 0	(2019)						

Part												
Section	on A. Governing Body and Management	<u> </u>	<u> </u>	<u> 1</u>								
<u>Occur</u>			Yes	No								
1a	Enter the number of voting members of the governing body at the end of the tax year 12	72.4		1 1								
	If there are material differences in voting rights among members of the governing body, or		_ 1	. 2								
	if the governing body delegated broad authority to an executive committee or similar	',		数中排液								
	committee, explain on Schedule O.	1	"	ara it								
þ	Enter the number of voting members included on line 1a, above, who are independent . 12	* .	4	73								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		1								
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? .	3		1								
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<b>V</b>								
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1								
6	Did the organization have members or stockholders?	6	<u> </u>	<u> </u>								
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	1									
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	]										
	stockholders, or persons other than the governing body?	7b	1									
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	.3	` `	N. S. S.								
	the year by the following:	سيد		1.00								
а	The governing body?	8a	<b>\</b>	}								
b	Each committee with authority to act on behalf of the governing body?	86	<b>&gt;</b>	├								
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 on Schedule O	9		1								
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	yes									
10a	Did the averagination have lead shouters broughes or offiliates?	10a	Yes	No /								
_	Did the organization have local chapters, branches, or affiliates?	IVA	-	├ <u>ॅ</u>								
b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		ŀ								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	<u> </u>	1								
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	S.E.	W	37								
12a	Did the organization have a written conflict of Interest policy? If "No," go to line 13	12a		1								
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b										
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"											
	describe in Schedule O how this was done	12c		<u>.                                    </u>								
13	Did the organization have a written whistleblower policy?	13	L	1								
14	Did the organization have a written document retention and destruction policy?	14	L	1								
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?	,										
а	The organization's CEO, Executive Director, or top management official	15a	L	<u> </u>								
þ	Other officers or key employees of the organization	15b		<u> </u>								
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	15	4									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	<sup>3</sup> ,	it								
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its		, . ^	35								
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	2	-44 -24	رلوبه ر شودر د								
Coati	organization's exempt status with respect to such arrangements?	16b	L	<u> </u>								
<u>3ecu</u>	on C. Disclosure											
18	List the states with which a copy of this Form 990 is required to be filed New York		41 -									
10	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  Own website  Another's website  Upon request  Other (explain on Schedule O)	I (Sec	tion :	501(c)								
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of and financial statements available to the public during the tax year.	f inte	rest p	oolicy,								
20	State the name, address, and telephone number of the person who possesses the organization's books and re Bohdan S. Sawycky, 297 Clarksville Road, West Windsor, New Jersey 08550 :: 609-750-9899	cords	<b>&gt;</b>									

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Part VII	Compensation of Officers, Directors, Trus	toes Key Employees High	est Compensated Employees, and
T GIC VII	Compensation of Chicers, Directors, mas	rees! icel mubiological indu	and an orthographical merbinations are
	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. See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

Control and box in the disappearance the	any related organization compensation							log any sumone	Jinour, amoutur,	
44)	(B)			Pos	-			(0)	(E)	(F)
(A) Name and title	(B) Average	(do not check more than one box, unless person is both an						Reportable	Reportable	Estimated amount
Name and tide	hours					ntod at feurfylo		compensation	compensation	of other
	per week	8 5	3	0			_	from the	from related	compensation from the
	(list any hours for	individual trustee or director	St	Officer	1	혈	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	organization and
	related	중요	) to	🔻	를	yee yee	97	(		related organizations
	organizations below	ੋ ਵ	12		oye	, on		} i		
	dotted line)	童	Test.	1	•	92		1		
		-	8	]		Highest compensated employee	]	)		
(1) Myron Spolsky			-	┝	-	-	<del>                                     </del>			
President	25	1	1	1	1		1	o	o	o
(2) Andrij Rebryk	<b></b>			<u> </u>	<del>                                     </del>		$\vdash$			
Vice President	10				1			o	0	0
(3) Natalia Bosak-Kovalyk				_	Ι-		_			
Secretary	5	1		1	1			o	o	o
(4) Bohdan S. Sawycky							_			
Treasurer	5	1		1	1	] :		o	o	0
(5) Mykola Muzala										
Member	1	1	1	}			1	0	0	0
(6) Andrij Genyk-Berezovsky										
Member	1	1	1	1	l		1	0	0	0
(7) Sofia Zakharchuk					$\Box$					
Member	1	✓ .			ł		}	0	0	0
(8) Marta Kuzmovych							Γ			
Member	1	1	1	1	l	1	1	0	0	o
(9) Olia Feheshyn										
Member	1	1		į .	1			) o	0	0
(10) Marko Jakubovych					Т		Г			
Member	1	1		Ì	l			j	o	o
(11) Ivan Chyr			Г	$\Box$	1					
Member	1	1		1	}		Ì	0	o	0
(12) Lesia Fedorenko				$\Box$		$\vdash$	$\Box$			
Member	1	1			ł	1		0	0	0
(13)				Γ						
	Ţ	}	}	}	}	1 .	}	}		
(14)					Г					
		<u> </u>		L.	L		_			

Part	VII Section A. Officers, Directors, 1	rustees,	Key I	m	ploj	yee	s, an	a H	lignest Compe	nsaceo (	cuibio)	rees (cor	iuriuea)
					•	C)			ĺ		1	_	
	(A)	(8)	do n	ot ch		non	e than c	one	(0)	(E)	- 1	(F) Estimated	
	Name and title	Average hours	box.	unles	s pe	noen	is both	an	Reportable compensation	Report compen	_	esumated of oth	
		per week					or/trust		from the	from re		compen from	
		(list any hours for	Individual trustee or director	19	ğ	94 8		Forme	organization (W-2/1099-MISC)	(W-2/1099		organizati	ion and
		related	S E	킇	٦	를	yes or	۳	}		}	related orga	inizations
		organizations below	<b>]</b>	3	]	18	ğ	}	}		1		
		dotted line)	8	<u>\$</u>	Officer		Highest compensated employes				į		
				L.		L	8	乚					
(15)			ł										
(16)			1								ł		-
(17)			<del>                                     </del>				$\vdash$	t		<del> </del>			
		<b></b>	<del> </del> _	-	╄	↓	<b>↓</b>	┡					
(18)	999 / 111 / W. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<del> </del>	1	}	-	1	}					l L	
(19)													
(20)			-			1	1						
(21)				$\dagger$	╁	_	<del>                                     </del>	$\dagger$	<del>                                     </del>	<del> </del> -			<u> </u>
(22)		<del> </del>	}	╁	╁	╁	-	├					
			1_	_	$\downarrow$	1	<u> </u>	L					
(23)	**************************************	<del> </del>	1			1							
(24)		Ţ											
(25)			_	T	1	†	<del>                                     </del>	†	<del> </del>	<u> </u>		ļ	
1b	Subtotal	<u> </u>	Ц	1_			<u> </u>	Ļ		ļ	0	<del> </del>	
C	Total from continuation sheets to Part		 on <b>A</b>	•	•	•	• •			<del></del>	- 0	<del></del>	
-	Total (add lines 1b and 1c)							•	0		0		0
2	Total number of individuals (including bu							e) v	vho received mo	re than \$	100,000	of	
	reportable compensation from the organ	ization >											
													es No
3	Did the organization list any former employee on line 1a? If "Yes," complete									st comp	ensated	3	T J
4	For any individual listed on line 1a, is the									nsation f	rom the		7 1 . 3
	organization and related organizations												, g
	individual			•		•		•				4	1
5	Did any person listed on line 1a receive of	or accrue c	ompe	ense	ation	n fro	m an	y ui	nrelated organiza	ition or in	dividua	1 - T- P	
Secti	for services rendered to the organization on B. Independent Contractors	r II res,"	comp	INTE	<u> 30</u>	ried	ule J	ior	such person .	<del>· · ·</del>	<del></del> -	5	
1	Complete this table for your five hig	hest comp	ensat	ted	ind	lene	nden	t c	ontractors that	received	more	than \$10	0.000 0
	compensation from the organization. Rep	ort compe	nsatio	n fo	r th	e ce	alenda	ar ye	ear ending with o	r within th	ne organ	nization's	tax year.
	(A) Name and business address								(B) Description of ser	vices		(C) Compensati	on
								I					
								+			<del> </del>		
						_		I					
2	Total number of independent contractor	are finalud	ina h		20+	);:	tod -		hasa liated sh	<u> </u>	1	To Charles M.	٠ . الع . العة والاس
	received more than \$100,000 of compens	ation from	the o	rgai	niza	tion	b	<u> </u>	NONE	ve) who	Park C	د ويو ع	14.00 Car

Part	VIII	Statement of Rev				, , , , , , , , , , , , , , , , , , , ,				
		Check if Schedule	O co	ntains a re	espor	se or note to ar	<del></del>			· · · · 🗹
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
2 9	1a	Federated campaign	ns .	<del></del>	1a		٠,		St. Sagar S. G.	;
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues			1b	33,783.27		·		
ع ق	c	Fundraising events			1c			<u> </u>	-	,
ifts,	đ	Related organization	ns .		1d	81,378.44	•	-5	, 1	ي ا
, E	e	Government grants	(cont	ributions)	1e					شم في
Sir	f	All other contribution			1	1	-			
		and similar amounts no	ot incli	uded above	11	26,200 00	<b>1</b>	<u>ا</u> ـ	-	
물통	g	Noncash contribution					ļ		-	
no pu		lines 1a-1f			1g					1
<u>o</u> e	<u>h</u>	Total. Add lines 1a-	<u>-1f</u> .	• • • •	<u>· · · </u>		141,362.71	<u> </u>		<del> </del>
60		Ochonista Damen				Business Code	22 252 90	22.252.00	<del></del>	<del> </del>
Program Service Revenue	2a	Subscription Revenue				511120	33,253.89	33,253.89	<b></b>	<del> </del>
gram Ser Revenue	b					<del> </del>	<del> </del>	ļ	<del></del>	
E §	6					<del> </del>				<del> </del>
E &	d						ļ	<del> </del>		
5,_	e	All other program se				}	<del> </del>	}		<del> </del>
<u>α</u> ,	g	Total. Add lines 2a-					33,253.89		<del> </del>	<del> </del>
	3	Investment income					33,233.03	<del> </del>	<del> </del>	<del> </del>
	•	other similar amoun					13,456,14	<u> </u>		13,456.14
	4	Income from investr	-							
	5				•					<del>                                     </del>
	} _		Ė	(i) Rea		(ii) Personal	, ,	•	· · · · · ·	- ,
	6a	Gross rents	6a				†	Ì		,
	b	Less: rental expenses	6b			†	1	1		,
	C	Rental income or (loss)					1 ,	İ	İ	
	d	Net rental income o		s)		▶				<del> </del>
	7a	Gross amount from		(i) Securi	ities	(ii) Other		£ //	<u> </u>	
		sales of assets					n -		<b>{</b>	4 4
		other than inventory	7a					1	ł	
ē	Ь	Less: cost or other basis					]			,
r Revenue		and sales expenses .	7b				}.		1	1
ě	C	Gain or (loss)	7c	<u> </u>		<u> </u>	<u> </u>		<u> </u>	
<u> </u>	d	Net gain or (loss)			<u> </u>	<u> </u>	<u> </u>			<u> </u>
ş	8a	Gross income from		ındraising	1		j	<u> </u>	}	* ****
U		events (not including		d as 1:	l		ļ <i>.</i>			
		of contributions rep 1c). See Part IV, line		a on line			\e^2	l	ĺ	
	ь	Less: direct expens		• • •	8a 8b	<del> </del>	1	i	ļ	}
	c	Net income or (loss)				ents	<del> </del>	<del> </del>	<del> </del>	ļ
	9a	Gross income 1			ig eve	<del>1103 P</del>	<del>                                     </del>	~	· · · · · · · · · · · · · · · · · · ·	7 . 127
	"-	activities. See Part I	IV. lin	90111119 A 19	9a	1		F		1
	ь	Less: direct expens			9b	<del></del>	1	}	[	
	C	Net income or (loss)				es <b>&gt;</b>		<del> </del>	<del> </del>	<del> </del> -
	1	Gross sales of in				<u> </u>	<del> </del>	7	' +	7 7.00
	}	returns and allowan			10a	Ì		<b>\</b>		
	Ь	Less: cost of goods	sold		10b	1	1 -	}		
	С	Net income or (loss)	from	sales of in	vent	ory <b>&gt;</b>		<del> </del>		<del> </del>
2	[					Business Code	, ,			2-,1
<b>6</b> 0	11a	Verizun Rebate					200.25			200.25
lan	Ь									
scellaneo Revenue	C									
Miscellaneous Revenue	d	All other revenue	• .							
	e	Total. Add lines 11a	<u>-11d</u>	<u> </u>	· ·	<u></u>	200.25			` .
	12	Total revenue. See	instr	uctions		<u></u>	188,272.99	33,253.89		13,656.39

# Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).				
	section 501(c)(3) and 501(c)(4)	organizations must complete all (	columns. All other organizations mus	t complete column (A).

Check if Schedule O contains a response or note to any line 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 domestic organizations and domestic governments. See Part IV, line 21	0			Land Contract	
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0			o mineral interest	
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0			14 A	
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0		, walt	. १ २ ५५६	
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				
7	Other salaries and wages	0				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0				
9	Other employee benefits	0				
10	Payroll taxes	0			1	
11	Fees for services (nonemployees):					
a	Management , ,	o				
Ь	Legal	<del></del>	<del></del>	<del></del>	<del></del>	
C	Accounting	125.00	<del></del>	125.00		
-		125.00		123.00	<b></b>	
đ	Lobbying	<del></del>	AT PRESIDENT TRANSPORT	Eddurate Targe (No.		
е	Professional fundralsing services. See Part IV, line 17	0	のあるとのなるない	NAMONS WE RAVE		
f	Investment management fees	0		<u></u>	ļ	
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) .	0				
12	Advertising and promotion	0				
13	Office expenses	1,457.67		1,457.67		
14	Information technology	0				
15	Royalties	0				
16	Occupancy	0				
17	Travel	29,579.43	29,237.42			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0				
19	Conferences, conventions, and meetings .	27,497.97	27,497.97			
20	Interest	0				
21	Payments to affillates	16,020.00	16,020.00			
22	Depreciation, depletion, and amortization	0	<del></del>		<del></del>	
23	Insurance	0				
24	Other expenses. Itemize expenses not covered	2 ~ 动河河南南	كاستداء والد فيتواند فيمون والمعالية	21-47-5-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-	مرياهيسوري إلى مرياها	
<b>-</b> T	above (List miscellaneous expenses on line 24e. If line 24e arrount exceeds 10% of line 25, column				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	(A) amount, list line 24e expenses on Schedule O.)	<b>经过程的</b>	10 40 PM 10 8	THE BOTH . THE		
а	Printing, Publishing & Distribution	25,505.00	25,505.00	11 - 41 - 77 - 303 1	F	
ь	Dues and Subscriptions	265.15	20,000.00	265.15	<del></del>	
c		200.15		203.13		
d		<del> </del>			<del> </del>	
	All other expenses	<del></del>		<del></del>	<del> </del>	
95	All other expenses	400 450 00	00 000 10	4 447		
25	Total functional expenses. Add lines 1 through 24e	100,450.22	98,602.40	1,847.82		
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here I if		·			
	following SOP 98-2 (ASC 958-720)					

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	rt X		<u> </u>
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	1,897.35	1	1,953.05
	2	Savings and temporary cash investments	529,881.88	2	617,648.95
l	3	Pledges and grants receivable, net		3	
- 1	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5 kg 5	p contract of the contract of
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).	5.深 6		
g	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a		لشما	
	ь	Less: accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	531,779.23	16	619,602.00
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	2	22	
-5	23	Secured mortgages and notes payable to unrelated third parties		23	<del></del>
	24	Unsecured notes and loans payable to unrelated third parties	<del></del>	24	<del> </del>
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0		0
alances	27	Organizations that follow FASB ASC 958, check here ► ☐ and complete lines 27, 28, 32, and 33.  Net assets without donor restrictions		27	
õ	28	Net assets with donor restrictions		28	
Net Assets or Fund Balar		Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.		ار مراد ارد مراد ارد مراد	
Ø.	29	Capital stock or trust principal, or current funds		29	
39(	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
AB	31	Retained earnings, endowment, accumulated income, or other funds	531,779.23		619,602.00
<u>e</u>	32	Total net assets or fund balances	531,779.23		619,602.00
	33	Total liabilities and net assets/fund balances	531,779.23	33	619,602.00
					Form 990 (2010)

Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		188,2	72.99
2	Total expenses (must equal Part IX, column (A), line 25)	2			50.22
3	Revenue less expenses. Subtract line 2 from line 1	3			22.77
4	The competency rated personal and personal and the control of the	4		531,7	<u>79.23</u>
5	The state of the s	5			0
6	Donated Services and doc of identifies	6			0
7		7			0
8		8			0
9	and distinct about of faile balances (explain on concease o).	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	İ			
		10		619,6	02.00
Part	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII	• • • •	<u> </u>		<u> </u>
				Yes	No
1	Accounting method used to prepare the Form 990:  Cash  Accrual  Other		}~	, ,	
	If the organization changed its method of accounting from a prior year or checked "Other," exp	olain in	1.	,	.54
	Schedule O.			_ 1	. 15 . 5
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .		2a	ļ.,	1
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	oiled or	٠ -	ŗ	
	reviewed on a separate basis, consolidated basis, or both:		^	ļ. ,	إب
	Separate basis Consolidated basis Both consolidated and separate basis		1		3 <sup>3</sup> }
D	Were the organization's financial statements audited by an independent accountant?		2b	7.	/
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	d on a	ι,	( )	,
	separate basis, consolidated basis, or both:			{	37
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		'	7	. '
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over			l	
	the audit, review, or compilation of its financial statements and selection of an independent accountant		2c	<del> </del> -	<del></del>
	If the organization changed either its oversight process or selection process during the tax year, exp Schedule O.	olain on	<b>.</b>		, ,
0-			14 "L 1		· `
38	As a result of a federal award, was the organization required to undergo an audit or audits as set forti Single Audit Act and OMB Circular A-133?	n in the	1	1	1
<b>h</b>		• •	3a		1
Ü	If "Yes," did the organization undergo the required audit or audits? If the organization did not under required audit or audits, explain why on Schedule O and describe any steps taken to undergo such au-		ЗЬ	}	j
		uilo .		000	(2019)

#### SCHEDULE A (Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

Employer identification number

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ▶ Attach to Form 990 or Form 990-EZ.

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

Inspection

Plast Conference, Inc. 06-1416006							
Par	Reason for Public Cha	rity Status (All	organizations must	comple	te this pa	art.) See instruction	ns.
The c	rganization is not a private founda	tion because it is	s: (For lines 1 through	12, chec	k only on	e box.)	a
1	☐ A church, convention of churc	•					99
2	A school described in section						
3	A hospital or a cooperative ho	spital service org	anization described in	n section	170(b)(1	)(A)(iii).	
4	A medical research organization		onjunction with a hosp	oital desc	ribed in s	ection 170(b)(1)(A)(	III). Enter the
_	hospital's name, city, and stat		II				L wit described in
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)						
6 7							
8	☐ A community trust described in	n section 170(b)	(1)(A)(vi). (Complete I	Part II.)			
9	An agricultural research organ or university or a non-land-gra university:	ization described int college of agr	d in <b>section 170(b)(1)</b> iculture (see instruction	(A)(ix) op ons). Ente	erated in ir the nan	conjunction with a le ne, city, and state of	and-grant college the college or
10	An organization that normally receipts from activities related support from gross investmen acquired by the organization a	to its exempt fu t income and un	nctions—subject to corelated business taxal	ertain exc ble incom	ceptions, ne (less si	and (2) no more that ection 511 tax) from	n 331/3% of its
11	An organization organized and				-		
12	An organization organized and	operated exclus	sively for the benefit o	f, to perfo	orm the fu	inctions of, or to car	ry out the purposes
	of one or more publicly supp						
	Check the box in lines 12a thro	•	•• •		•	-	•
a		•		•		•	
	the supported organization					he directors or trust	ees of the
	supporting organization. Y						ممادها الماسم
b	Type II. A supporting orga control or management of organization(s). You must	the supporting o	rganization vested in	the same			
C		<b>rated.</b> A suppor	ting organization oper	rated in c			ally integrated with,
d	_		•		•	• •	orted organization(s)
	that is not functionally inte						
	requirement (see instruction						
e	Check this box if the organ functionally integrated, or	nization received Type III non-fund	a written determination	on from ti	ne IRS the	at it is a Type I, Type ion.	ii, Type III
f	Enter the number of supported						[]
g	_ <del></del>	<del>~</del>					
	(I) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	listed in you	rganization ir governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
				Yes	No		
(A)							
(B)							
(C)							
(D)							
(E)							
Tota	<del></del>	<del>                                     </del>					

CONCOUN	377 (F 2011 000 01 000-LZ) 2010						
Part	Support Schedule for Organiza	itions Descri	ibed in Secti	ons 170(b)(1)	)(A)(iv) and 1	70(b)(1)(A)(vi	)
	(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization falled to qualify under Part III. If the organization falls to qualify under the tests listed below, please complete Part III.)						
		quality unde	r the tests lis	tea below, pi	ease comple	te Part III.)	<del>/</del>
	on A. Public Support		0.2.0040	(-) 0047	/-N 0010	(e) 2019	(f) Total
	dar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	16) 2013	lij/i Otei
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
_	include any "unusual grants.")					/	
2	Tax revenues levied for the organization's benefit and either paid						
	to or expended on its behalf						
	The value of services or facilities				<del></del>	<del>/</del>	
3	furnished by a governmental unit to the	]		i			
	organization without charge	]					
4	Total. Add lines 1 through 3	<del></del>	<del></del>	<del> </del>	<del></del>		
	_	4 4 4 7	34 ************************************	74 TO 12 TO 12 TO 1	" " " " " " " " " " " " " " " " " " "	Company 4810	
5	The portion of total contributions by		2 2 2 2 2 2	. 0		1	
	each person (other than a governmental unit or publicly	1	Tariban Tariban	53.46	1. 1/2 3 1		
	supported organization) included on		A	***********************	1/30/2	30 00 or 18	
	line 1 that exceeds 2% of the amount	77.20	A 200		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	- A	
	shown on line 11, column (f)	12000	2 35 36 9	3	/ a . " ;	20 4 A	
6	Public support. Subtract line 5 from line 4	STEP ON		-/	1, ,	• • 4	
Secti	on B. Total Support	·					
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends,						
	payments received on securities loans,	1	1	/	ł		
	rents, royalties, and income from	ł	} /	ľ	}		
	similar sources				l		
9	Net income from unrelated business			]			
	activities, whether or not the business	}	/	1	]		
	is regularly carried on				ļ	<b></b>	
10	Other income. Do not include gain or	[	/		(		
	loss from the sale of capital assets (Explain in Part VI.)	}	Y	ļ	<b>[</b>	{	
44	•	100	PENS RESIDE	St. 170mm 1 1011 711	CV to the second of	~ ५ सन्दर्	
11 12	Total support. Add lines 7 through 10 Gross receipts from related activities, etc.			CHE THE MAN	-4-20	<del></del>	L
13	First five years. If the Form 990 is for the			d third fourth	or fifth tay v	12	n 501(a)(3)
••	organization, check this box and stop he				<del>-</del>		30 ,(c,(o, ▶
Secti	on C. Computation of Public Suppo			<del></del>		<del></del>	
14	Public support percentage for 2019 (line			1, column (fi)		14	%
15	Public support percentage from 2018,Sc	hedule A. Part	II, line 14 .			15	%
16a		ization did not	check the bo	x on line 13, ai	nd line 14 is 3	31/3% or more,	check this
	box and stop here. The organization qua	alifies as a publ	licly supported	organization			▶ 🛘
b	331/3% support test-2018. If the organ	ization did not	check a box of	on line 13 or 16	a, and line 15	is 331/3% or m	ore, check
	this box and stop here. The organization			-			· · Þ 📮
17a	10%-facts-and-circumstances test-2	<b>019.</b> If the orga	anization did n	ot check a bo	x on line 13, 1	6a, or 16b, and	d line 14 is
	10% or more, and if the organization m	eets the "facts	-and-circumst	ances" test, ch	neck this box a	and stop here.	Explain in
	Part VI how the organization meets the	"tacts-and-circ			zation qualifie	s as a publicly	supported
	organization	· · · · ·					· · · 🟲 🗆
þ	10%-facts-and-circumstances test—2	018. If the org	anization did r	ot check a bo	x on line 13, 1	6a, 16b, or 17	a, and line
	15 is 10% or more, and if the organization	ation meets th	e "facts-and-	circumstances	test, check	this box and	stop here.
	Explain in Part VI how the organization supported organization						a publicly
18		 id not obook o		40-40-47			▶ 🗆
10	Private foundation. If the organization dinstructions	ю пот спеск а	DOX ON IMP 13	, 16a, 16b, 17a	i, or 1/b, chec	k this box and	see
	instructions	<del></del>	<del>· · · · · ·</del>	<del></del>			
					Sch	redule A (Form 99	0 or 990-EZ) 2019

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Casti	an A Dublic Support						
	on A. Public Support	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
Caleni 1	dar year (or fiscal year beginning in)	(a) 2015	(D) 2010	(4) 2011	12, 2010		1.7 1.0141
•	received. (Do not include any "unusual grants.")	32,893	57,995	61,310	86,873	96,373	335,444
2	Gross receipts from admissions, merchandise	32,033	- 51,550	0.,0.0			
_	sold or services performed, or facilities		<b>!</b>	1			
	furnished in any activity that is related to the		i	Ì	ì	į	
3	organization's tax-exempt purpose	·					
J	unrelated trade or business under section 513			1	1		
4	Tax revenues levied for the		<del></del>	<del></del>		<del></del>	
4	organization's benefit and either paid to		1	<b>§</b>	}		
	or expended on its behalf		Ţ				
5	The value of services or facilities						
	furnished by a governmental unit to the		1			<b>`</b>	
	organization without charge			}		]	
6	Total. Add lines 1 through 5	32,893	57,995	61,310	86,873	96,373	335,444
7a	Amounts included on lines 1, 2, and 3	<u> </u>					
	received from disqualified persons .	]		)		}	
b	Amounts included on lines 2 and 3						
-	received from other than disqualified		<u> </u>				
	persons that exceed the greater of \$5,000	]				1	
	or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support. (Subtract line 7c from	. 5.5	** *		,		
	line 6.)	5-A		, ,	1	教がなる	335,444
	on B. Total Support					<del>,</del>	
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6	32,893	57,995	61,310	86,873	96,373	335,444
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties, and income from similar sources.	0.405	7.000	0.004	40.44	40.450	40.070
		8,425	7,390	9,291	10,114	13,456	48,676
D	Unrelated business taxable income (less	ł ·					
	section 511 taxes) from businesses acquired after June 30, 1975	1 .				{	
_	Add lines 10a and 10b	8.425	7,390	9,291	10,114	13,456	48,676
11	Net income from unrelated business	0,423	7,350	3,231	10,174	(3,430	40,070
"	activities not included in line 10b, whether						
	or not the business is regularly carried on					1	
12	Other income. Do not include gain or						
_	loss from the sale of capital assets	}				}	
	(Explain in Part VI.)	{				200	200
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	41,318			96,987	111,029	384,320
14	First five years. If the Form 990 is for the		's first, secon	d, third, fourth	, or fifth tax ye	ear as a sectio	n 501(c)(3)
	organization, check this box and stop he		. <u> </u>	<u></u>		· · · · ·	· · ▶ 🗆
Secti	on C. Computation of Public Suppo						
15	Public support percentage for 2019 (line			13, column (f))		15	86.73 %
16	Public support percentage from 2018 Sc			<u> </u>	<del></del>	16	86.75 %
	on D. Computation of Investment In					<del></del>	
17	Investment income percentage for 2019	•		•	* * * *	17	13.27 %
18	Investment income percentage from 201					18	13.25 %
19a	331/3% support tests—2019. If the organ						
	17 is not more than 331,8%, check this box		_	•		_	
b	331x9% support tests—2018. If the organi line 18 is not more than 331x9%, check this						
20	Private foundation. If the organization d	_	<del>-</del>	-			
	THE PARTY OF THE PROPERTY OF T	いっけいしょうけいしん 社	DUA UII III IC 14.	. 130. UI 130. (	いらしん いりろ ロロメ	OU IU SEE IIISIIU	וויים פונטוט

Yes No

### Part IV Supporting Organizations

Section A. All Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

1	Are all of the	organization's supported	organizations	listed by	name in the	organization's	governing

- 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.
- 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).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- 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.
- 4a 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.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign 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.
- 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 to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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).
- 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).
- 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.
- **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.
- 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**.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
  - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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	9b	THE STATE OF	3
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t	9b 9c	W. A.	

Part	V Supporting Organizations (continued)			
		(See	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	7	Se	
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	-	-	- A. S. C.
_	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	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	لـــا	
Section	on B. Type I Supporting Organizations		V	
	Million in the second s	+Church	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	1	1 to	
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or	د رهنوا		Pa (2)
	controlled the organization's activities. If the organization had more than one supported organization,		1	·
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	2	. 0	1
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	Baca.	Kengani	A-14
_	•	1	lare 38	~=~
2	Did the organization operate for the benefit of any supported organization other than the supported	100	B	0
	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,			3
	supervised, or controlled the supporting organization.	-		PARTY ST
Cook		2	L	
2600	on C. Type II Supporting Organizations		Yes	No
1	Many a majority of the approximations discontain on to place device the tour year also a majority of the discontain	<b>8</b>		, 40
•	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	1990 .,	0	
	or management of the supporting organization was vested in the same persons that controlled or managed	E.	E	12
	the supported organization(s).	1300	Farin.	-
Casti	on D. All Type III Supporting Organizations	1_1_	ــــــ	L
Secu	on D. Air Type III Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	100 g	F .	
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	1 !	, '	The Care
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	1 2	]: <**	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	hi-t-	<u>-</u>
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	> 0	E-Sec.	1
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	Por.	2	1 2 C
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	-	
3	By reason of the relationship described in (2), did the organization's supported organizations have a	1		45 3
	significant voice in the organization's investment policies and in directing the use of the organization's	5.0	( a.	9. 1
	Income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	i de	1	535
	supported organizations played in this regard.	3		
Secti	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	instru	ction	s).
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity	see in		
2	Activities Test. Answer (a) and (b) below.	· zkrw.	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	1,372	1 2	
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI Identify	la '	1, 31	A 2.
	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		150	28
	that these activities constituted substantially all of its activities.	126	فتخصا	3231
ь	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	2a	1-126-2	9/1:36
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	13		
	reasons for the organization's position that its supported organization(s) would have engaged in these	30	P. 524	1. 3
	activities but for the organization's involvement.	-	تفسد	398
9		2b	SE-mi	5 m. s.
3	Parent of Supported Organizations. Answer (a) and (b) below.	100	3 0	泛
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		0.75	1
	trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a	banca	200
, p	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	200	De pose	S.S.
·	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 Org	an	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
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	1		
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)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		Harris Control	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
a Average monthly value of securities	1a	<del></del>	2 The space
b Average monthly cash balances	1b	<del></del>	
c Fair market value of other non-exempt-use assets	10		
d Total (add lines 1a, 1b, and 1c)	1d	<del></del>	
e Discount claimed for blockage or other	1	<del> </del>	
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2	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		
Section C-Distributable Amount	<del></del>		Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	33 .	
2 Enter 85% of line 1.	2	N/D	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	262 x	
4 Enter greater of line 2 or line 3.	4	TE - 15	
5 Income tax imposed in prior year	5	Bara	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6	with the same	
7 Check here if the current year is the organization's first as a non-functional instructions).	y in	tegrated Type III supporting	g organization (see

Part	Type III Non-Functionally Integrated 509(a)	3) Supporting Organi	zations (continued)	
Secti	on D-Distributions			Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers ex organizations, in excess of income from activity	rted		
3	Administrative expenses paid to accomplish exempt pur	poses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets			
<u>-</u>	Qualified set-aside amounts (prior IRS approval required	<u>)</u>		
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whi (provide details in Part VI). See instructions.	ch the organization is res	ponsive	
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount	<del></del>	<del></del>	
	on E—Distribution Allocations (see instructions)	(II)		(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6	7,4		
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019		•	1,
a	From 2014			
b	From 2015			·
C				
d				,
e	From 2018		4	
f	Total of lines 3a through e			·
g	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2019 distributable amount	<u> </u>	. ,	
i_	Carryover from 2014 not applied (see instructions)			
_ <u>i</u> _	Remainder. Subtract lines 3g, 3h, and 3i from 3f.	<u></u>		}
4	Distributions for 2019 from Section D, line 7:	3, 4	÷ "	ام د د د د د د د د د د د د د د د د د د د
a	Applied to underdistributions of prior years	A		
<u>b</u>		2.7	t '	
C	Remainder. Subtract lines 4a and 4b from 4.			3 3 4
5	Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3t and 4b from line 1. For result greater than zero, explain Part VI. See instructions.	h .		
7	Excess distributions carryover to 2020. Add lines 3j and 4c.	<u> </u>	4.	The section
8	Breakdown of line 7:	7 7 7 7 7 7	<del></del>	
а	Excess from 2015	1.		
Ь	Excess from 2016	<u></u>		
C				
d				,
e	Excess from 2019	1.	÷	1

Pά	O	8	Ю

raitvi	III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, Ilnes 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
Part III: Sec	tion B; # 13e = \$200.25 rebate from VERIZON Services.
	***************************************
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#### SCHEDULE F (Form 990)

## **Statement of Activities Outside the United States** ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

OMB No. 1545-0047 2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Plast Conference, Inc.

▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

> Employer Identification number 06-1416006

General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and 1 other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to ✓ Yes □ No award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (c) Number of (b) Number (d) Activities conducted in the (e) If activity listed in (d) is (f) Total employees, agents, and independent contractors region (by type) (such as, fundraising, program services, investments, grants to recipients of offices in a program service, describe specific type of expenditures for and investments service(s) in the region in the region located in the region) In the region n 25,505.00 (1) Eastern Europe A **Publications** Program Services (2) Eastern Europe 0 ٥ 16.020.00 Program Services Aid to develop scouting (3) camps & the purchase (4) of camping equipment (5) (6) (7) (8) (9) (10) (11) (12)(13)(14)(15)(16)(17)41,525,00 Subtotal . . . . . . 6 Calaboration of the sale of th 0 Total from continuation sheets to Part I . . . . ٥ 0 6 41,525.00 Totals (add lines 3a and 3b)

1 (a) Name of organization	(b) IRS code section and EIN (d'applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Marrier of cash disbursament	(g) Amount of noncash assistance	(b) Description of noncesh essistance	(i) Method of valuation (book, FMV, appraisat, other)
1)		Ukraine	Publish Publications	25,605.00	check/wire			
2)		Ukraine	Scouting Equipment	16,,020.00	check/wire			
3)								
(4)		<u> </u>						
5)							ļ	
<b>5</b> )								
7)								
B)								
9)								
0)								
1)					_			
2)								
3)								
4)								
5)								
6)								
2 Enter total by the IRS	, or for which the	grantee or counsel	sted above that are reco	501(c)(3) equivale	ency letter		•	2
3 Enter tota	number of other	organizations or en	tuties	<u> </u>	<u> </u>	<u> </u>	>	2

Page 3

Schedule F (Form 990) 2019

Part III	Grants and Other A Part III can be duplic	ssistance to Individu ated if additional space	als Outside i e is needed.	the United State	s. Complete if the	organization ansv	vered "Yes" on Form 98	0, Part IV, line 1
(a) Ty	pe of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncesh assistance	(h) Method of vertication (book, FMV, appraisal, other)
(1)								
(2)								<u> </u>
(3)			11					<u> </u>
(4)	···					 		
(5)					·			<b> </b>
(6)			11	<del></del>				<b> </b>
(n								
(8)					<b>_</b>			ļ
(9)		<b></b>					! 	<u> </u>
10)					<u> </u>			
11)								<b></b>
12)	<del> </del>							ļ
13)			<b> </b>		ļ		<u> </u>	ļ
14)	<del></del>	<b> </b>						<b> </b>
15)			<b> </b>			<b></b>		<b></b>
16)					ļ	ļ		<del> </del>
(17)		<b></b>			<b></b>	<del> </del>		<del> </del>
(18)		j	1		1	1	İ	1

Schedule F (Farm 990) 2019

Schedule f	Form	ggn\ 2	Drn(
CONTECTION.	11 04111	03014	:V   3

Page 4

Part	V Foreign Forms		•
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	☐ Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐ Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	☐ Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	☐ Yes	☑ No

Schedule F (Form 990) 2019

Part V	Supplemental Information
	Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.
1) All recipie	ents of the funds are members of the Plast Ukrainian Scouting Organizations. Subscription grants are based on an invoice identifying
	ng costs, handling and postage expense for each of the quarterly publications.
2) All overse	eas payments are made via bank wire - our financial institution utilizes "Coast to Coast" software to ensure our compliance with all OFAC
and FINCEN	regulations.
#27-2-7-0	
4-1-041	
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### SCHEDULE O (Form 990.or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Plast Conference, Inc.

### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

2019

OMB No. 1545-0047

Open to Public Inspection

Employer identification number 06-1416006

FORM 990:
- Part III: # 4a = Publication expenses are offset by member subscriptions, which were US\$ 33,253.89 in 2019.
- Part VI: Section A; # 6 = The Directors and Officers are elected to three year terms by representatives of the Plast Scouting Organizations located
in the United States, Canada, Germany, Austria, Ukraine, Argentina and Australia.
- Part VI: Section A; # 7a = representatives of the worldwide Plast Scouting Organizations meet every three years and elect the Directors and Officers.
- Part VI: Section A; #7b = As a result of the geographic dispersion of the Directors and Officers, only the President and the Treasurer review the 990
and Schedules A, B, F and O prior to filing. Directors and Officers are notified of the filing and access the 990's remotely via the internet. It should
be noted that the Treasurer provides a monthly financial report to the Directors and Officers and a quarterly financial report to representatives of
all the Plast Scouting Organizations. Additionally, the financials are reviewed by an independent auditing committee (chosen by the representatives
of all the Plast Scouting Organizations).
- Part VIII: # 1d = A grant of US\$ 78,243.44 was received from Plast Publishing, Inc. (a Plast Scouting affiliate located in Toronto, Canada) for the sole
of funding the publication and distribution of future Plast Scouting material
- Part IX: # 19 = These expenses are related to the triennial general meeting of the representatives of the world-wide Ukrainian Scouting Organizations
which was held in October 2019. The next general meeting is scheduled to be held in 2022.
- Part IX: # 21 = These grants were provided to the Ukrainian Scouting Organization located in Ukraine. This financial assistance helped in further
developing the scouting movement in Ukraine by helping to finance summer camps, purchasing scouting equipment and printing and distributing
scouting related material. These grants were funded by the annual dues collected from the world-wide Ukrainian Scouting Organizations - including
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