3214612FEB

Firm's address

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

For Paperwork Reduction Act Notice, see the separate instructions.

9.22

☐ Yes ☐ No

Form 990 (2019)

Cat. No. 11282Y

) (Revenue \$

Other program services (Describe on Schedule O.)

Total program service expenses ▶

including grants of \$

127,734.43

(Expenses \$

AD

Part	Checklist of Required Schedules		Vac	Na
_	In the association decembed in continue 504(a)(0) or 4047(a)(4) (athor then a private foundation)? If "Voc."		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		√
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		✓
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		✓
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			√
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	8		∀
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		~
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, 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
b	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		1
ď	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
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
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
b	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	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	L	1
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	 	✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or 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		1
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		1
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?			
20a	If "Yes," complete Schedule G, Part III	19 20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a	 	7
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		/

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		V
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	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a	ļ	/
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		✓
C	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 24d		1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24U		\ <u> </u>
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	25a	ļ	1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	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		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):	7.00		1 2 4 30%
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		1
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		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		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		<u> </u>
38 Part	the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38		' -
- er (Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V	ل <u>ٽٽ</u> 		
1a	Enter the number reported in Box 2 of Form 1999 Fig. 1999		Yes	No
b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	3	17.3	- (d) - (d)
c	Did the organization comply with backup withholding rules for reportable payments to vendors and	200	430	Fred
 -	reportable gaming (gambling) winnings to prize winners?	1c	ايُو	

arı	Statements Regarding Other into Finings and Tax Compilative (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		200	图
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 1			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	
-	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		18	2
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	-	1
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		1
_	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
4a	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 ►	1325		45"30"6
D	See instructions, for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
E.o.	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	Control of the second	STATE OF THE PARTY
5a	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		7
b		5c		7
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	- 3 -		
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?	6b		1
7	Organizations that may receive deductible contributions under section 170(c).			A STORY
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		22	
	and services provided to the payor?	7a		
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] _		j
	required to file Form 8282?	7c		,
d	If "Yes," indicate the number of Forms 8282 filed during the year	ă.		EL)
0	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		<u> </u>
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		100	
	sponsoring organization have excess business holdings at any time during the year?	8	-	2 22
9	Sponsoring organizations maintaining donor advised funds.	数 語		150
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	38		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]	15.53	验证	124
11	Section 501(c)(12) organizations. Enter:	1		1
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources		34	数
	against amounts due or received from them.)	题	EK.	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	题		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	壁灣	和新	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.	200	要到	造数
b	Enter the amount of reserves the organization is required to maintain by the states in which		1	表现
	the organization is licensed to issue qualified health plans	20		
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
þ	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b		
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?	15		
	If "Yes," see instructions and file Form 4720, Schedule N.	200		500
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		L
	If "Yes," complete Form 4720, Schedule O.	R.M.	料料	開鍵

Part		See II	rstruc	ะนอกร.
Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 5	常統	***	
	If there are material differences in voting rights among members of the governing body, or	製器		18.2
	if the governing body delegated broad authority to an executive committee or similar			186
	committee, explain on Schedule O.		15	
b	· · · · · · · · · · · · · · · · · · ·			
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	 	1
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	1	
7a	one or more members of the governing body?	7a	<u> </u>	1
b			1	1.
	stockholders, or persons other than the governing body?	7b	ļ	1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		34	18.2
	the year by the following:		1	
a		8a	1	
b	==== distribution of the governing body:	8b	1	
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
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)
	Division of the second of the		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		1
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		1
11a	has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	1	 `
b	Describe in Schedule O the process, if any, used by the organization to review this Form 900		634 E	金融
12a	bid the organization have a written conflict of interest policy? If "No." go to line 13	12a	SEESA.	1
b	were officers, directors, or trustees, and key employees required to disclose annually interests that could give rice to conflict a	12b		1
C	old the digalization regularly and consistently monitor and and and			
13	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	12c		/
14	The street of th	13		1
15	bid the organization have a written document retention and doctrication and	14		
	The die process for determining companyation of the fell	湖為	B) 44	V V
а	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director and approval by		到	蘊
ь		15a	التعط	
_	The state of the state of the organization	15b	-,- 	<u></u>
16a			22 21	TELEO.
b	with a taxable entity during the years to, or participate in a joint venture or similar arms.			
-	Darticipation in injury was follow a written policy or procedure required	16a		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	organization's exempt state arrangements under applicable federal tax law and take at the evaluate its		医数	W - 1
		6b		- <u> </u>
18	List the states with which a copy of this Form 990 is required to be filed Texas			· ·
2	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (9) Own website Another's website Upon request Other (or the first applicable), 990, and 990-T (9)			
[Own website Another's website Column Another's website Another's website Another's website Column Another	Sectio	n 50	1(c)
9 [Describe on Schedule O whether (and if on hear) Upon request Other (explain on Schedule O)		- 50	- (-)
a	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of intate the name, address, and telephone number of the			
0 S	tate the name, address, and telephone number of the person who possesses the organization's books and recent	iteres	t poli	су,
E	dwin Barnhart 9700 Westward Dr. Austin TV 70700			

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Form	990	(201	191

	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Em		~
Dart VI	III. Campanestian at Otticare, Directare, Irlietage, KAV Employees, Millinesi Compensiien Ell	ibiovees. ai	HU
raitvi		.p,,	
	Independent Contractors		
	magagaaga Couraciois		

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 relate	d orga	aniz	atio	n c	ompe	nsa	ted any current	officer, director,	or trustee.
				(0	•					
(A)	(B)			Posi				(D)	(E)	(F)
Name and title	Average					than o		Reportable	Reportable	Estimated amount
	hours					or/trust		compensation	compensation	of other
	per week		_		_			from the	from related	compensation
	(list any	호호	펿	Officer	€	콩호	Former	organization	organizations (W-2/1099-MISC)	from the organization and
	hours for related	중합	<u> </u>	ě	(3	\ <u>\delta</u>	[₫	(W-2/1099-MISC)	(44-2/1099-14113C) 	related organizations
	organizations	호후	ă		Key employee	8 g	ſ		ĺ	, , oletou e. ge. lieutiette
	below	2	2		9	g g	j	[
	dotted line)	Individual trustee or director	Institutional trustee			Highest compensated employee		}		
] _	<u> </u>				8	<u>L</u>	<u> </u>	<u> </u>	
(1) Edwin Barnhart	50									
]	1	1	1	Ĺ		45,000.00		
(2) LeAndra Bridgeman, Director	1]								
		<u> </u>	1			<u> </u>	<u> </u>			
(3) Frederic Barnhart, Director	1]	Γ							
			1	L	_		<u> </u>	<u> </u>		<u> </u>
(4) Blair Duncan, Treasurer	2	ļ	ł	l	1	}			į	}
		<u> </u>	✓		<u> </u>	<u> </u>	<u> </u>			
(5) Charles Williams, Secretary	1	J			Γ		Γ			
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Part	VII Section A. Officers, Directors, 7	rustees,	Key i	Emj	ploy	yee	s, an	<u>d H</u>	lighest Compe	nsated Em	ployees	continued)
						C)					1	
	(A)	(B)				ition	. 44		(D)	(E)	1	(F)
	Name and trile	Average					than one of the second		Reportable	Reportable		ated amount
		hours				lirect	or/trust		compensation	compensatio		of other
		per week (list any	우ᇹ	ī	₽	8	쁔	5	from the organization	from related organizations		npensation rom the
		hours for	Individual trustee or director	喜	Officer	Key employee	ploy	Former	(W-2/1099-MISC)	(W-2/1099-MIS	SC) orga	nization and
		related organizations	합	Ö		횽	8 6	`			related	organizations
,		below	200	1		yee	를					
		dotted line)	8	Institutional trustee		ł	Highest compensated employee					
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(15)												
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122/			1					1				
1b	Subtotal	<u> </u>		Ь	J	l	i		45.000.00		- 	
C	Total from continuation sheets to Part		n A	•	•	•	• •		45.000.00			
d	Total (add lines 1b and 1c)			•	•			•	45,000.00			
2	Total number of individuals (including but							N (e			000 of	··· - · · · · · · · · · · · · · · · · ·
_	reportable compensation from the organi							-,	0	· · · · · · · · · · · · · · · · · ·		
												Yes No
3	Did the organization list any former	officer, dire	ector.	tn.	ıste	e. k	cev e	mp	lovee, or highes	st compensa	ated "*	
	employee on line 1a? If "Yes," complete										. 3	7
4	For any individual listed on line 1a, is the							n a	and other compe	nsation from	the	134 7965
-	organization and related organizations											1, 1,
	ındıvidual										. 4	7
5	Did any person listed on line 1a receive of	r accrue c	ompe	nsa	tion	fro	m any	/ un	related organiza	tion or individ	dual	
	for services rendered to the organization											1
Secti	on B. Independent Contractors											
1	Complete this table for your five high											
	compensation from the organization. Rep	ort comper	rsatio	n fo	r the	е са	lenda	r ye	ear ending with or	within the or	rganizatior	n's tax year.
	(A)							1	(B)		(C)
	Name and business add	ress						<u> </u>	Description of ser	vices	Comper	
								<u> </u>				
								 				
								igspace				
								-				
	T.L.I	P "				12		<u> </u>		, , , , , , , , , , , , , , , , , , ,	7	
2	Total number of independent contractor							o th		e) who 🎏 🖰	1	winn it sift
	received more than \$100,000 of compens	auon irom '	rue of	gar	ıızal	IION			0	1 5	_ * *	, · ' - [

Part	VIII	Statement of Revenue Check if Schedule O contains a re	esnon	se or note to an	v line in this Pa	rt VIII		🗖
	1	Oneon in contention of contention and	жро п		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ह ह	1à	Federated campaigns	1a	,				
E Z	b	Membership dues	1b	750.00				
اع ق	C	Fundraising events	1c					
T A	d	Related organizations	1d					
2 B	÷	Government grants (contributions)	1e			Satisfaction of		
S is	f	All other contributions, gifts, grants,		,			merceal a	
Contributions, Gifts, Grants and Other Similar Amounts		and similar amounts not included above	1f	7138.39				
흔통	g	Noncash contributions included in		,				
اظ ۾		lines 1a-1f	<u>1g</u>	\$				
2 4	h	Total. Add lines 1a-1f		<u> ▶</u>	7888.39			
		e		Business Code			N. P. S.	
<u>Ş</u>	2a	Study abroad programs		,	104,535.48			104,535.48
6 5 E	þ	Public educational travel programs			85,529.02			85,529.02
n S	C				<u>-</u>			
gram Ser Revenue	d	***************************************		<u> </u>				
Program Service Revenue	e`							
م ا	t	All other program service revenue		L		AND CONTROL OF THE PROPERTY.		STREET, TOWNS A WAR
	g	Total. Add lines 2a-2f			190,064.50			
	3	Investment income (including divother similar amounts)						
	4	Income from investment of tax-exer						
	5	Royalties	•	•	271.70	······································		271.70
	•	(i) Rec		(ii) Personal				
•	6a	Gross rents 6a		(,,		The second second		
*	b	Less: rental expenses 6b		<u> </u>				
	C	Rental income or (loss) 6c						
	d	Net rental income or (loss)		>	1			232
	7a	Gross amount from (i) Secur	ities	(ii) Other				
•	,	sales of assets		,				
		other than inventory 7a		<u> </u>				
9	b	Less: cost or other basis						
evenue		and sales expenses . 7b						
ě	С	Gain or (loss) 7c						
<u> </u>	d	Net gain or (loss)	·	<u> ▶</u>				,
Other R	8a	Gross income from fundraising	1					
0		events (not including \$						
		of contributions reported on line	1_					
		1c). See Part IV, line 18	8a					
	D .	Less: direct expenses	8b	I boto			as something	
1	C A	Net income or (loss) from fundraisi	ig eve	aus ▶				
	9a	Gross income from gaming activities. See Part IV, line 19	0					
•	L .	Less: direct expenses	9a 9b					
1	b	Net income or (loss) from gaming a		<u>1</u>				ALC: NO PERSONS AND ADDRESS OF THE PERSON AN
	400	Gross sales of inventory, less	Cuviti	55				305 300 5 35 500 50
	10a	returns and allowances	10a					
	Ь	Less: cost of goods sold	10b	 				
	c	Net income or (loss) from sales of i			Store Colonia Store Sand Store	The state of the s	PRINCHE STERRING SHOP MISSING	B0000000000000000000000000000000000000
<u>o</u>	† - <u>-</u> -			Business Code				
Miscellaneous Revenue	11a					Market Market (d) 200	THE PART OF THE PARTY OF THE	The same same of the second second second
	b							,
scellaneo Revenue	c							
is R	ď	All other revenue						
Σ.	е	Total. Add lines 11a-11d . '		>				建造建筑建筑
	12	Total revenue. See instructions		. , ▶	198,224.59			190,335.20

Part	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	Check if Schedule O contains a response							
		(A)	(B)	(C)	(D)			
	t include amounts reported on lines 6b, 7b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses			
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 .	930.00	930.00					
. 2	Grants and other assistance to domestic							
	ındividuals. See Part IV, line 22	•						
3	Grants and other assistance to foreign organizations, foreign governments, and							
-	foreign individuals. See Part IV, lines 15 and 16							
4	Benefits paid to or for members							
5	Compensation of current officers, directors, trustees, and key employees							
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)							
7	Other salaries and wages	38,461.50		38.461.50				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)		•					
9	Other employee benefits							
10	Payroli taxes	9980.00		9980.00				
11 a	Fees for services (nonemployees): Management	9200.00		9200.00				
b	Legal	5200.00						
C	Accounting							
d	Lobbying		THE CONTRACTOR SEATON AND ADMINISTRA	amount to somewhere, the property				
e	Professional fundraising services. See Part IV, line 17				· · · · · · · · · · · · · · · · · · ·			
f g	Investment management fees	-						
12	Advertising and promotion	1482.15	-	1482.15				
13	Office expenses	3797.08		3797.08				
14	Information technology	2495.75		2495.75				
15	Royalties			· · · · · · · · · · · · · · · · · · ·				
16	Occupancy	8347.83		8347.83	[
17 18	Payments of travel or entertainment expenses	313.09		313.09	,			
	for any federal, state, or local public officials		n					
19	Conferences, conventions, and meetings .	<u> </u>						
20	Interest	3418.56		3418.56				
21 22	Payments to affiliates							
23	Insurance	·······		•				
24	Other expenses. Itemize expenses not covered							
	above (List miscellaneous expenses on line 24e. If							
	line 24e amount exceeds 10% of line 25, column							
	(A) amount, list line 24e expenses on Schedule O.) Bank and credit card fees	1885.21		1885.21				
a ,b	Professional memberships	1315.40	1	1315.40				
C	Study abroad programs	70,253.94						
d	Public education travel programs	57,480.49			,			
е	All other expenses		ļ					
<u>25</u> 26	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	209,361.00	128,664.43	80,696.57				
, 20	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)	,						

	art X	Check if Schedule O contains a response or note to any line in this Pa	tX	· .	
	. –		(A) . Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	3175.39	1	. 372.82
	2	Savings and temporary cash investments	56.90	2	328.60
	3	Pledges and grants receivable, net		3	
	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	
	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)		6 6	
ţ	7	Notes and loans receivable, net	, , , , , , , , , , , , , , , , , , , ,	7	
Assets	8	Inventories for sale or use		8	<u> </u>
Ä	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	<u> </u>
	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)	3232.29	-	701.42
	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	THE RESIDENCE OF THE STREET
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		22	
Ë	23	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 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	0.00	26	0.00
lces		Organizations that follow FASB ASC 958, check here ▶ ☐ and complete lines 27, 28, 32, and 33.			
lar	27	Net assets without donor restrictions	AND OCCUPATION OF THE PROPERTY OF THE PARTY	27	A AND THE PROPERTY OF THE PROP
. 8	28	Net assets with donor restrictions		28	
Vet Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds		29	<u> </u>
ě	30	Paid-in or capital surplus, or land, building, or equipment fund		30	<u> </u>
AS	31	Retained earnings, endowment, accumulated income, or other funds		31	
ë	32	Total net assets or fund balances	3232.29	•	701.42
7	1 22	Total liabilities and not espeta/fund balances		22	1 704.40

_	-	•
Page	7	4

Part					_
	Check if Schedule O contains a response or note to any line in this Part XI		· · · ·		<u> </u>
1	Tourist of the Control of the Contro	1	1	98,224.	41.59
2	— comit outbourses (viscos admires and its account (c. A) mile may	2		209,3	61.00
3	Troverside rece expenses: education 2 month mile 1	3		<u>-1</u>	1,136
4	The about of fair balance at boginning of your (made oqual fairs) mile by column (),	4		32	32.24
5	Trock difficulties and the country of the country o	5			
6		6			
7		7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9		86	05.54
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
		10		7	01.42
Part	Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII	• •	• • •		
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Cash Other		\	7	
	If the organization changed its method of accounting from a prior year or checked "Other," exp	olain	in 🔯	3.1	
	Schedule O.		128	24	
2a	, , , , , , , , , , , , , , , , , , ,				√ ·
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	oiled	or [秦義		海
	reviewed on a separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				2
b	Were the organization's financial statements audited by an independent accountant?		2b		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	d on	a Pily		
	separate basis, consolidated basis, or both:			1	1
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		-300		
C	· · · · · · · · · · · · · · · · · · ·				
	the audit, review, or compilation of its financial statements and selection of an independent accountant			20. 20	√
	If the organization changed either its oversight process or selection process during the tax year, exp	olain			"看
	Schedule O.		2	2.00	
3a		h in t	1		
	Single Audit Act and OMB Circular A-133?		3a	1	✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not unde			1	
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such au	dits .		ــــــــــــــــــــــــــــــــــــــ	L
			For	m 99 0	(2019)

file copy

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name	ame of the organization Employer identification number									
Maya	laya Exploration Center 11-3685707									
	Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.									
The c	he organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).									
1			•					na		
2		school described in section		•			•	1)1		
3	∐Ar	nospital or a cooperative hos	spital service org	anization described in	section	170(b)(1)(A)(iii).			
4		nedical research organization	•	onjunction with a hosp	ntal desc	nbed in s	ection 170(b)(1)(A)(iii). Enter the		
_		spital's name, city, and state						-1 14 .1 - 16 .1 1-		
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	□Af	ederal, state, or local govern	nment or govern	mental unit described	in section	on 170(b)	(1)(A)(v).			
7		organization that normally scribed in section 170(b)(1)			oort from	a govern	nmental unit or trom	the general public		
8	□Ad	community trust described in	n section 170(b)	(1)(A)(vi). (Complete I	Part II.)					
9	☐ An	agricultural research organi	zation described	in section 170(b)(1)	A)(ix) op	erated in	conjunction with a l	and-grant college		
		university or a non-land-gra	nt college of agr	iculture (see instructio	ns). Ente	r the nan	ne, city, and state of	the college or		
		versity:								
10	✓ An	organization that normally represented	receives: (1) more	e than 331/3% of its si	ipport irc	m contru Sentions	outions, membership and (2) no more that	p rees, and gross n 331/3% of its		
	sui	poort from gross investment	t income and uni	related business taxal	ole incom	ie (less se	ection 511 tax) from	businesses		
		quired by the organization a								
11		organization organized and								
12	∐ An	organization organized and	operated exclus	ively for the benefit of	t, to perto	om the it	unctions of, or to cal	ry out the purposes		
	OT Ch	one or more publicly suppo eck the box in lines 12a thro	orted organizatio	ns described in secu soribos the type of sur	spe uc no	yroanizatio	on and complete line	e section bus(a)(b). he 126, 12f, and 12c		
_			_	• • • • • • • • • • • • • • • • • • • •	-	-		_		
а		Type I. A supporting organithe supported organization								
		supporting organization. Y					the directors or trust	ees of the		
b		Type II. A supporting orga	-				supported organizati	on(s) by having		
	لبا '	control or management of	the supporting o	raanization vested in	the same	nersons	that control or man	age the supported		
		organization(s). You must				, po. 00. 10		ago ale coppolica		
c		Type III functionally integ	•	-		onnectio	n with, and function	ally integrated with,		
	_	its supported organization	(s) (see instructio	ns). You must comp	lete Part	IV, Secti	ions A, D, and E.			
d		Type III non-functionally	i ntegrated. A su	pporting organization	operated	d in conn	ection with its suppo	orted organization(s)		
		that is not functionally inte	grated. The orga	nization generally mu	st satisfy	a distribu	ition requirement ar			
		requirement (see instructio	ns). You must c	omplete Part IV, Sec	tions A	and D, ar	nd Part V.			
е		Check this box if the organ	nization received	a written determination	on from t	he IRS th	at it is a Type I, Type	e II, Type III		
		functionally integrated, or	Type III non-fund	tionally integrated sup	oporting (organizat	ion.			
f		er the number of supported of								
9		ride the following information					,	,		
	(i) Nam	ne of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10		irganization ur governing	(v) Amount of monetary support (see	(vi) Amount of other support (see		
				above (see instructions))		ment?	instructions)	instructions)		
				. "	- 			•		
	·				Yes	No				
(A)										
		·						· · · · · · · · · · · · · · · · · · ·		
(B)										
<u></u>										
(C)										
(D)										
		· · · · · · · · · · · · · · · · · · ·				:				
(E)										
Tota										

Schedu	le A (Form 990 or 990-EZ) 2019						Page 2
Part	Support Schedule for Organization (Complete only if you checked the Part III. If the organization fails to	ne box on line	5, 7, or 8 of	Part I or if the	e organizatio	n failed to qua	
Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
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						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4	Section 500	TE IN THE	142 63.71	可以通知, · · · · · · · · · · · · · · · · · · ·	Saller Sandie	
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, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10			"。据DA. AU			
12	Gross receipts from related activities, etc.	*	•			12	
13	First five years. If the Form 990 is for to organization, check this box and stop he		n's first, secon		i, or tinth tax y	ear as a section	1 5U1(c)(3)
Secti	ion C. Computation of Public Suppo			· · · · · ·	· · · · · ·		<u> </u>
14	Public support percentage for 2019 (line			11. column (fl)		14	%
15	Public support percentage from 2018 Sc			,		15	/%
16a	331/3% support test—2019. If the organization qua	nization did not alifies as a pub	check the bo	i organization			▶ 🗆
b	331/2% support test—2018. If the organ this box and stop here. The organization	ization did not n qualifies as a	check a box of publicly support	on line 13 or 16 orted organizat	Sa, and line 15 ion	is 33 ¹ / ₃ % or m	ore, check · · ► □
17a	10%-facts-and circumstances test—2 10% or more, and if the organization m Part VI how the organization meets the organization	eets the "facts	-and-circumst	tances" test, c	heck this box	and stop here.	Explain in
b	10% facts-and-circumstances test—2 15 is 10% or more, and if the organiz Explain in Part VI how the organization supported organization	ation meets th	ne "facts-and-	circumstances	" test, check	this box and s	top here.
··18	Private foundation. If the organization dustructions	lid not check a	box on line 13	3, 16a, 16b, 17	a, or 17b, chec	k this box and	

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	n failed to qualify under Part II
If the organization fails to qualify under the tes	ts listed below, please complete	Part II.)

	on A. Public Support						
Calend	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees				}		
	received. (Do not include any "unusual grants.")	2250	1450	3594	3350	7888	18,832
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513	252,525	_ 318,925	178,119	170,104	190,065	1,109,738
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						· - · · · · · · · · · · · · · · · · · ·
5	The value of services or facilities furnished by a governmental unit to the organization without charge					,	
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons.	255,075	320,375	181,713	173,454	198,225	1,128,842
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b				l		
8	Public support. (Subtract line 7c from line 6.)						1,128,842
	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6	255,075	320,375	181,713	173,454	198,225	1,128,842
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b				i		
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.)	255,075	320,375	181,713	173,454	198,225	1,128,842
14	First five years. If the Form 990 is for the organization, check this box and stop he	he organization	s first, secon	d, third, fourth	, or fifth tax ye		1 501(c)(3)
Secti	on C. Computation of Public Suppo						
15	Public support percentage for 2019 (line					15	100 %
16	Public support percentage from 2018 Sc			<u> </u>	<u> </u>	16	100 %
	on D. Computation of Investment in	icome Percei	ntage				
						1 4 -> 1	0 %
17	Investment income percentage for 2019	•	• •	-			
17 18	Investment income percentage for 2019 Investment income percentage from 201	8 Schedule A, I	Part III, line 17			18	0 %
17	Investment income percentage for 2019 Investment income percentage from 201 331/3% support tests—2019. If the organ	8 Schedule A, I	Part III, line 17 check the box	on line 14, ar		18 ore than 331/3%	o % 6, and line
17 18	Investment income percentage for 2019 Investment income percentage from 201 331/3% support tests—2019. If the organ 17 is not more than 331/3%, check this box 331/3% support tests—2018. If the organic	8 Schedule A, I nization did not and stop here. zation did not c	Part III, line 17 check the box The organization that a box on	on line 14, ar on qualifies as a line 14 or line 1	nd line 15 is ma publicly suppo 9a, and line 16	ore than 3318% orted organization is more than 3	0 % 6, and line on . ► ✓ 3¹/3%, and
17 18 19a	Investment income percentage for 2019 Investment income percentage from 201 331/3% support tests—2019. If the organ 17 is not more than 331/3%, check this box	8 Schedule A, I nization did not and stop here. zation did not c box and stop h	Part III, line 17 check the box The organization heck a box on ere. The organizations	on line 14, ar on qualifies as a line 14 or line 1 ization qualifies	nd line 15 is ma publicly suppo 9a, and line 16 as a publicly s	nore than 331/2% orted organization is more than 331/2% orted organization is more than 331/2% or the same of the same or the	0 % 6, and line on . ► ✓ 31/3%, and zation ►

Part IV 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.)

Se	ct	ioi	n A	. A	II S	que	poi	rting	Or	gan	izá	ati	on	S

- 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?
- 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 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**.
- 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.
- 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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Part	Supporting Organizations (continued)			
			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)	2.3	1	
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
C	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		
Secti	on B. Type I Supporting Organizations		Yes	NIa
_		हासुर अ	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the		1	1
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,	11/2		
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		تحتناء
2	Did the organization operate for the benefit of any supported organization other than the supported	13.73	746° (37.7.33 37.7.33
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	100	2.6	1
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	100		
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			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	180°	1	
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	300	سنت	2.5
0		11	L	<u> </u>
Secu	on D. All Type III Supporting Organizations		Yes	No
4	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	724	1 CS	2.53
1	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	100	6.40	
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	Later Control		Y.
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		-41
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	20.34.4	i de la	¥ 3
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how		in a	574
	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	3	37	2
	significant voice in the organization's investment policies and in directing the use of the organization's	19	70	35.
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's		ي دوريو مست	263
	supported organizations played in this regard.	3		<u> </u>
Sect	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.			
2	The organization supported a governmental entity. Describe in Part VI how you supported a government entity Activities Test. Answer (a) and (b) below.	see in		
a		S GAG	Yes	No **
-	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	132		
	those supported organizations and explain how these activities directly furthered their exempt purposes,	1		
	how the organization was responsive to those supported organizations, and how the organization determined	1		1
	that these activities constituted substantially all of its activities.	2a	تغثث	Marie Co.
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	17.4	900	200
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	7		334
	reasons for the organization's position that its supported organization(s) would have engaged in these			5.4
_	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.	Garage	7.59	\$ 14°
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	3		(44)
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		N.	100 C
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	L	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ani	zations	
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 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):			
a Average monthly value of securities	1a		
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):	1		
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
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			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	林理女士, 12.120.54 电影型	
2 Enter 85% of line 1.	2	THE PARTY OF THE P	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	LINE MOLPHES TO THE	
4 Enter greater of line 2 or line 3.	4	1. 如此的一下以外的一个	
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).			L
7 Check here if the current year is the organization's first as a non-functional	ıy ın	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 e	exempt purposes		,
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	mpt purposes of suppo	rted ,	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	<u> </u>
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)		<u> </u>	
6	Other distributions (describe in Part VI). See instructions.	······	4	
7	Total annual distributions. Add lines 1 through 6.		,	L
8	Distributions to attentive supported organizations to which (provide details in Part VI). See instructions.	h the organization is res	ponsive	
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount	15		
Secti	on E-Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6		THE PERSON NAMED IN THE PE	
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			
	From 2014			
<u>_</u>	From 2015			
C	From 2016			
d	From 2017			
e	From 2018	7.06517.45.6612.3612.3612		
f	Total of lines 3a through e	The state of the s		Zerok William
q	Applied to underdistributions of prior years		The state of the s	
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.	,	THE REPORT OF THE PARTY	
4	Distributions for 2019 from Section D, line 7:			
a	Applied to underdistributions of prior years		DE LA SCRIPTION AND AND AND AND AND AND AND AND AND AN	
	Applied to 2019 distributable amount			THE SHIP TO SHIP TO SHIP THE S
	Remainder. Subtract lines 4a and 4b from 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 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			,
.7	Excess distributions carryover to 2020. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2015			THE PARTY OF THE PARTY
b	Excess from 2016			
c	Excess from 2017	143730 / H.W. 147		
d	Excess from 2018	Methoday - Comment	THE TANK THE	
е	Excess from 2019			

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Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part 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, lines 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.)
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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization	ļ	Employer identification number
Maya Exploration Center		11-3685707
		
Part IV		
Section A. 2. Two members of the board are related - Edwin and Frederic		
Section A. 6. MEC offers paid annual membership to interested parties v	vho recieve member only gifts and	discounts
Section B. 11a. Form 990 and all acompanying materials are porvided to	officers as soon as they are comp	leted each year
Section B. 19. Financial documents are available for review upon writter	request. A Director will mail or er	nall deliver the
requested financial information.		
Part VIII		
5. Royalties - Amazon Affiliates Program payments for 5% of all sales di	iven to amazon.com through links	on our website
Part XI		
9. MEC was carrying \$8606.54 of debt on a business credit card as of the	e end of 2019.	
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