Form **980-PF** Department of the Treasu Internal Revenue Service

Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990PF for instructions and the latest information.

Fo	r calendar year 2019 or tax year beginning		, and ending		
N	ame of foundation			A Employer identification	number
	IUEC LOCAL 1 OF NYC SCHOLA	RSHIP FUND		13-3251442	
	umber and street (or PO box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
_	47-24 27TH STREET			718-767-70	04
	ity or town, state or province, country, and ZIP or foreign p			C if exemption application is p	ending, check here
_	LONG ISLAND CITY, NY 1110			0.4.5	
AL G	Check all that apply Initial return	Amended return	ormer public charity	D 1. Foreign organizations	s, check here
9 _A	Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test,
WATER THE PERSON NAMED IN COLUMN TWO IN COLUMN THE PERSON NAMED IN COLUMN T	Check type of organization: X Section 501(c)(3) ex		110	E If private foundation state	
Ë	_	Other taxable private found	ation 04	under section 507(b)(1)	
ī	Fair market value of all assets at end of year J Accounti	ng method: Cash	X Accrual	F If the foundation is in a (• •
(from Part II, col. (c), line 16)	her (specify)	<u>. </u>	under section 507(b)(1)	
	\$ 68,397. (Part I, colun	ın (d), must be on cash bas	sis.)		
<u>[</u> F	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(0) Disbursements for charitable purposes (cash basis only)
_	1 Contributions, gifts, grants, etc., received	18,370.			
	2 Chieck I if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	170.	170.	170.	STATEMENT 1
22	4 Dividends and interest from secui				
2022	5a Gross rents				· · · · · · · · · · · · · · · · · · ·
9	D Net respective E(b) ED				
	62 Net gen-or (less) from sale of assets of or time 10				
FEB 1	7 (Capital gain net income (from Part IV, 1962		0.		
II a	8 Net short-term capital gain C			0.	
Ω	9 Income modifications, UT				
SCANNED	108 and allowances				
Ž	b Less Cost of goods sold				
Š	c Gross profit or (loss)				
B	11 Other income 12 Total. Add lines Through RECEIVED	18,540.	170.	170.	
-	12 Total. Add lines through FCELVED 13 Compensation of officers directors, trustees, etc.	DS 0.	0.	0.	0.
	14 Other employee sharles and wages 0 4 2020	10			
	15 Pension plans, emprovee benefits	121			
3000	16a Logal fees				
٥	b Accounting fees OGDEN UT				
Ľ.	c Other professional lees			·	
tive.	17 Interest 7 18 Taxes STMT 2	52.	0.	0.	0.
of the	18 Taxes STMT 2 19 Depreciation and depletion	54.		0.	<u> </u>
<u>.</u>	19 Depreciation and depletion 20 Occupancy				,, ,=
Agr	21 Travel, conferences, and meetings			-	i
2	22 Printing and publications				
5	23 Other expenses STMT 3	380.	0.	0.	0.
Operating and Administrative Expe	24 Total operating and administrative			_	_
Dei	expenses. Add lines 13 through 23	432.	0.	0.	0.
·	25 Contributions, girls, grants paid	29,000.			29,000.
	26 Total expenses and disbursements.	29,432.	0.	0.	29,000.
	Add lines 24 and 25 27 Subtract line 26 from line 12:	47,434.	0.	1	25,000.
	a Excess of revenue over expenses and disbursements	-10,892.			
	b Net investment income (if negative, enter -0-)		170.		
	c Adjusted net income (if negative, enter -0-)			170.	(

T _D	-	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End	of year
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
_	1	Cash - non-interest-bearing			
	,	Savings and temporary cash investments	79,289.	68,397	68,397.
	1	Accounts receivable		Hank Manhark Arriver adversa	
	"	Less: allowance for doubtful accounts	wanter That had been been been been been been been bee	Sand the state of	r in the second in the second
	1	Pledges receivable	A STATE OF THE STA	3.77.7 3 .00. 13.40.50.50.50.50	The state of the s
	"	Less: allowance for doubtful accounts	المنافظة الم	Marie to the marie and the said of the	أماءة المنتشرة المحافد والمستشار الاستعبار المتعبد
	_	Grants receivable			
	5				
	ا	Receivables due from officers, directors, trustees, and other	j		
	_	disqualified persons	57 449 5 55 AV 344 55	THE OTHER PLANTS BALLY AND THE AND A	2 28/4 () 15/1
	7	Other notes and loans receivable	EMPLE AND E	MIL MANAGER	E GALLER COM
		Less; allowance for doubtful accounts			
ţ	8	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
⋖	10a	Investments - U.S. and state government obligations		<u></u> ,	
	b	Investments - corporate stock			
	C	: Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis	wilder walky	1 To a see a second of the second of the	
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment; basis	36 - 26 June Branch to the	是一个人了我们上海的。 · 沙沙	Land Francis
		Less accumulated depreciation	Note that the second of the model (a color)	The state of the contract and the contra	The same and the same
	15	Other assets (describe)		· · ·	
		Total assets (to be completed by all filers - see the			 · ·
	'`	instructions. Also, see page 1, item I)	79,289.	68,397.	68,397.
-	17	Accounts payable and accrued expenses		0070570	CORT. LETTER THE
	18	Grants payable			Section Section Section
	1				
Liabilities	19	Deferred revenue			THE PROPERTY OF THE PARTY OF TH
		Loans from officers, directors, trustees, and other disqualified persons			M. The Property
ا a	21	Mortgages and other notes payable	80,398.	69,938.	CANADA MATATA
	22	Other liabilities (describe STATEMENT 5)	00,330.	03,330.	
		-	00 200	(0.030	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
_	23	Total liabilities (add lines 17 through 22)	80,398.	69,938.	3 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		Foundations that follow FASB ASC 958, check here			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
š		and complete lines 24, 25, 29, and 30.	4 400	4 5 4 4	The state of the s
ances		Net assets without donor restrictions	-1,109.	-1,541.	The Contract of the
=	25	Net assets with donor restrictions			为以政治 "我们还有那么
Net Assets or Fund Ba		Foundations that do not follow FASB ASC 958, check here ▶ └──			[2] "被告的现在分词
Ē		and complete lines 26 through 30.			
ხ │	26	Capital stock, trust principal, or current funds			电影影响的影响
ets	27	Paid-in or capital surplus, or land, bldg., and equipment fund			一、西川の神経にははないかり
8	28	Retained earnings, accumulated income, endowment, or other funds			所有的中部部の対象を必然に対し
5	29	Total net assets or fund balances	-1,109.	-1,541.	Frank Triber State
ž			- -		网络文艺生设建的一家 创
- 1	30	Total liabilities and net assets/fund balances	79,289.	68,397.	医影響
					<u> </u>
Pa	art i	Analysis of Changes in Net Assets of Fund B	alances		
1 1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	29	,	
		t agree with end-of-year figure reported on prior year's return)		1	-1,109.
		amount from Part I, line 27a		2	-10,892.
		increases not included in line 2 (itemize)	SEE ST	ATEMENT 4 $\frac{-}{3}$	10,460.
		ines 1, 2, and 3		4	-1,541.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (h), line 29	6	-1,541.
<u></u>	Jul	not dosers or fund balances at end of year (inte 4 fillings line 5) - Fart II, of	norm juj, mo 23		Form 900 DE (2010)

		of property sold (for exa or common stock, 200 sh		ate,	(D)	- Purc - Don	cquired chase ation		acquired day, yr.)	(d) Date sold (mo., day, yr.)
1a										
b NC	NE				ـــــ				_	
<u>c</u>										
_d					┾		+			<u> </u>
<u>e</u>	(4) D	epreciation allowed	(a) Co	st or other basis	┸╌┥			(b) C	ain or (loss	\
(e) Gross sales price	(1)	(or allowable)		expense of sale					s (f) minus (
<u>а</u> b	-									
C	 	· · · · · · · · · · · · · · · · · · ·			$\neg \dagger$					
d										
e										
Complete only for assets show	ng gain in c	olumn (h) and owned by	the foundation	n on 12/31/69.		•	(1	Gains (C	Col. (h) gaın	minus
(i) FMV as of 12/31/69		i) Adjusted basis as of 12/31/69		cess of col. (1) col. (1), if any			col.	(k), but Losses	not less than (from col. (n -0-) or h))
a	<u> </u>	····								
b										
C					\Box					
<u>e</u>			L							
2 Capital gain net income or (net ca	apıtal loss)	If gain, also enter If (loss), enter -0			}	2_		<u> </u>		
Net short-term capital gain or (lo	ss) as defin	ed in sections 1222(5) an	ıd (6):							
If gain, also enter in Part I, line 8,) .	• •		1					
If (loss), enter -0- in Part I, line 8 Part V Qualification U	ladas C		Dadwas	I Tay on Nat		3	2004 100			
Vas the foundation liable for the sec "Yes," the foundation doesn't quali Enter the appropriate amount in	fy under se	ction 4940(e). Do not con	nplete this par	t		_				Yes X No
(a)	each colum	(b)	isu actions be	iore making any e	(c)	-				(d) oution ratio
Base periód years Calendar year (or tax year beginni	na in)	Adjusted qualifying dis	tributions	Net value of no	nchar	rtable-	use assets	1	Distrib (col. (b) div	ution ratio ided by col. (c))
2018	<u> </u>	1	9,998.			6	1,740			.323907
2017			9,999.				7,805			.691964
2016			0,000.				7,567			.420460
2015			0,000.	·			0,041			.499488
2014		2	1,000.			2	7,501	•		.763609
Total of line 1, column (d)								2		2.699428
Average distribution ratio for the	-		on line 2 by 5.0	D, or by the numb	er of y	ears				~~~~
the foundation has been in existe	nce if less t	han 5 years						3		.539886
Enter the net value of noncharitat	ole-use asse	ets for 2019 from Part X, i	ine 5				-	4		65,079.
Multiply line 4 by line 3								5		35,135.
Enter 1% of net investment incon	ne (1% of P	art I, line 27b)						6		2.
Add lines 5 and 6								7		35,137.
Enter qualifying distributions from	n Part XII. lı	ne 4						8		29,000.
If line 8 is equal to or greater than See the Part VI instructions.			1b, and comp	lete that part using	g a 1%	6 tax r	ate.	L		

Forn	n 990-PF (2019) IUEC LOCAL 1 OF NYC SCHOLARSHIP FUND	13-	3251	442		Page 4	
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948	see	instru	ıctio	ns)	
18	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	25	1407.50 4.6 (v.)	All Line	1 5 4 g		
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		1	that it		188	
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1				<u>2.</u>	
	of Part I, line 27b	200	JAN -4		0 30	13.	
C	e All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)		and the same	ر اور اور اور اور اور اور اور اور اور او			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2				<u>0.</u>	
3	Add lines 1 and 2	3				2.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	4				0.	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	55				2.	
6	Credits/Payments:	源為	3	الآلون و وعم المناطقة		وماي ي	
	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 0.				4.1	100	
	Exempt foreign organizations - tax withheld at source 6b 0.		16.				
	Tax paid with application for extension of time to file (Form 8868)	C	2	ا ما العاربي الما العاربي			
	Backup withholding erroneously withheld 6d 0.	-352	512 8	Y	`&`	- 2 51	
_	Total credits and payments. Add lines 6a through 6d	7	L			0.	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				0.	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				2.	
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10					
	Enter the amount of line 10 to be: Credited to 2020 estimated tax Refunded Int. VII-A: Statements Regarding Activities	11					
				7.0	Yes	No	
14	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene any political campaign?	Ш		1a	163	X	
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the defin	tion		1b		X	
U	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	uon			مري ۳ يو	1, 2, 2	
	distributed by the foundation in connection with the activities.				3~	-36 h	
	Did the foundation file Form 1120-POL for this year?			1c	7i	X	
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			3.73 :	30.00	7.77	
٦	(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0.			3.0	7		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			1	اب و	75.	
	managers. ►\$ 0.			141.		X	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X	
	If "Yes," attach a detailed description of the activities.			376	¥ . 4	.,"	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, of	r		بت.د ^ر در.	1		
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3	•	X	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X	
	If "Yes," attach the statement required by General Instruction T.			10 12	1 7.00	14.7	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			1	1	1	
	By language in the governing instrument, or			350	11.0	75.3	
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law		المعتبرة	2	1.00	
	remain in the governing instrument?			6	X		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV			7	X		
				1,54	\$ 2 mg		
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.						
	NY			1	100	13	
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				النبيد		
	of each state as required by General Instruction G? If "No," attach explanation			8b	X		^
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	idar		ziżz.	STATE .	1.07	1
	year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV	TIN ETT	c	9	X		
IU	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses S	<u>rmt</u>	6.	10	x		

Form **990-PF** (2019)

L	at VIFA Statements negationg Activities (continued)			
•			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	1		
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13_	X	L
	Website address ► N/A			
14	The books are in care of ► LOCAL 1 SCHOLARSHIP FUND Telephone no. ► (718) 7		700	4
	Located at ► 47-24 27TH STREET, LONG ISLAND CITY, NY ZIP+4 ►11	101		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		, ▶	٠
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	1,4		
Da	foreign country			
Pe	art VII-B. Statements Regarding Activities for Which Form 4720 May Be Required		V	NI.
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	*	Yes	No
18	During the year, did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			. !
		s -		•
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No	,		. '
	a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	,	·	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		1	
	(4) Fay compensation to, or pay or remidure the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available		- 1	٠.
	for the benefit or use of a disqualified person)?		,	•
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	,	' '	•
	if the foundation agreed to make a grant to or to employ the official for a period after	•	ł	
	termination of government service, if terminating within 90 days.)			٠, ٦,
ь	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	_	," '	,
·	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	. :_ 1b	•	•
	Organizations relying on a current notice regarding disaster assistance, check here			100
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		- 1	
ŭ	before the first day of the tax year beginning in 2019?	1c	ı	Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
_	defined in section 4942(j)(3) or 4942(j)(5));		.	
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines	'		9
	6d and 6e) for tax year(s) beginning before 2019?		į	
	If "Yes," list the years , , ,		`	100
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	٠		
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach		- ()	
	statement - see instructions.) N/A	2b	ı	
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	ť	5.	7.
	>	.	L	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	,	. [- !
	during the year?		' !	
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after	, .	· .	
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose		٦	•
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,		·: .	• •
	Schedule C, to determine if the foundation had excess business holdings in 2019.) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		1	27
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		<u> </u>
	For	m 990	-PF	(2019)

Form, 990-PF (2019) IUEC LOCAL 1 OF NYC SCHO			13-3251	442	. 1	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (contil	nued)			
5a During the year, did the foundation pay or incur any amount to:				中心社	Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (sectio	1 4945(e))?	Y	es 🗶 No	27.3	4	***
(2) Influence the outcome of any specific public election (see section 4955); (r to carry on, directly or indir	ectly,		1.0	ģ.1€<	300
any voter registration drive?			es X No		1	X 3
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	es 🗶 No			派認
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section					1
4945(d)(4)(A)? See instructions		Y	es 🗶 No		额	1
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t			Y		100
the prevention of cruelty to children or animals?		Y	es 🗓 No	M.		1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described	ın Regulations		5	<u> </u>	
section 53.4945 or in a current notice regarding disaster assistance? See instr	uctions		N/A	5b		
Organizations relying on a current notice regarding disaster assistance, check	nere		▶[]	4.3		A
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it mainta	ined		4. 4.	25	5 25
expenditure responsibility for the grant?	Ŋ	I/A 🔙 Y	es No	美别	¥ 25.	4
If "Yes," attach the statement required by Regulations section 53.4945-5(d).				2.2	1	***
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			71. 1	7. At	1
a personal benefit contract?		Y	es 🗶 No	1:1	ê 9. °	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b		X
If "Yes" to 6b, file Form 8870.				1,07	و بالغرية	7,75
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Y	es 🗶 No	* 7		14.7
b If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A	7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in remuneration o			145	87.	41.7
excess parachute payment(s) during the year?			es X No	34 16		्र ५ छ।
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	anagers, Highl	У			
Paid Employees, and Contractors						
List all officers, directors, trustees, and foundation managers and t		(c) Compensation	(d) Contributions to		Evn	onco
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plan and deferred	s ac	count,	ense other.
	to position	enter -0-)	compensation	 	allowar	ices
			ſ	1		
SEE STATEMENT 7		0.	0			0.
DEE STATEMENT /	 -	ļ	ļ -	•		<u></u>
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		İ	ļ			
Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE."		Д		
Tomponia and the mignest para employees (early and an another mignest)		1	(d) Contributions to	1 0	e) Exp	ense
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plan and deferred	s aò	count, allowar	other
NONE	devoted to position		compensation	 '		1003
INOINE						
		-	 	+		
				1		
		[1	⊣		
						
· · · · · · · · · · · · · · · · · · ·						

Form **990-PF** (2019)

Total number of other employees paid over \$50,000

Part IX-B Summary of Program-Related Investments	 	_
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount	
1 N/A		_
]	
2	 1	
	 <u> </u>	
All other program-related investments. See instructions.	1	
3		
	 -	
	 1	
<u> </u>	 1	
	 1	
	 	_
Total, Add lines 1 through 3	,	(

923561 12-17-19

Form **990-PF** (2019)

P	art X Minimum Investment Return (All domestic foundation	ons must complete this part. For	oreign foundations, see	instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out ch	arıtable, etc., purposes:		
a	Average monthly fair market value of securities		1a	0.
b	Average of monthly cash balances		1b	<u>0.</u> 66,070.
C	Fair market value of all other assets		1c	
đ	Total (add lines 1a, b, and c)		1d	66,070.
е	Reduction claimed for blockage or other factors reported on lines 1a and		(4)	
	1c (attach detailed explanation)	1e	0.	
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	66,070.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater ar	nount, see instructions)	4	991.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here	and on Part V, line 4	5	65,079.
6	Minimum investment return. Enter 5% of line 5		6	3,254.
P	art XI Distributable Amount (see instructions) (Section 4942() foreign organizations, check here ▶ X and do not complete this		ndations and certain	
1	Minimum investment return from Part X, line 6		1	
2a	Tax on investment income for 2019 from Part VI, line 5	2a		
b	Income tax for 2019. (This does not include the tax from Part VI.)	2b		
C	Add lines 2a and 2b		2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	
4	Recoveries of amounts treated as qualifying distributions		4	
5	Add lines 3 and 4		5	
6	Deduction from distributable amount (see instructions)		6	
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and or	n Part XIII, line 1	7	
P	art XII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc	., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	29,000.
b	Program-related investments - total from Part IX-B		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out cl	narıtable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:			
a	Suitability test (prior IRS approval required)		3a	
b	Cash distribution test (attach the required schedule)		3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line	e 8; and Part XIII, line 4	4	29,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on ne	et investment		
	income. Enter 1% of Part I, line 27b		5	2.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	28,998.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent yet 4940(e) reduction of tax in those years.	ears when calculating whether the f	oundation qualifies for the s	ection

Part XIII Undistributed Income (s	ee instructions)	N/A		
	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2018	2018	2019
1 Distributable amount for 2019 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2019				
a Enter amount for 2018 only				
b Total for prior years:				
3 Excess distributions carryover, if any, to 2019:	,			
a From 2014				
b From 2015	,	1 ,	_	
c From 2016				ľ
d From 2017	1			
e From 2018	, !	Ĭ		
f Total of lines 3a through e				
4 Qualifying distributions for 2019 from				,
Part XII, line 4: ►\$				
a Applied to 2018, but not more than line 2a				
b Applied to undistributed income of prior				
years (Election required - see instructions)	•		·	
c Treated as distributions out of corpus			· ·	
(Election required - see instructions)		·		
d Applied to 2019 distributable amount				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				·
b Prior years' undistributed income. Subtract				
line 4b from line 2b		<u> </u>		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				٠.
d Subtract line 6c from line 6b. Taxable				
amount - see instructions				•
e Undistributed income for 2018. Subtract line				
4a from line 2a. Taxable amount - see instr.				
f Undistributed income for 2019. Subtract				1
lines 4d and 5 from line 1. This amount must			,	1
be distributed in 2020				
7 Amounts treated as distributions out of		•		
corpus to satisfy requirements imposed by				
section 170(h)(1)(F) or 4942(g)(3) (Flection			,	٠,
may be required - see instructions)	· 			
8 Excess distributions carryover from 2014		1 '	1	
not applied on line 5 or line 7		<u> </u>	<u> </u>	
9 Excess distributions carryover to 2020.				
Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9:	-	1		(,
a Excess from 2015				
b Excess from 2016	•		-	
c Excess from 2017			,	,
d Excess from 2018		, ,	1	
e Excess from 2019		<u> </u>	<u> </u>	L

Part XIV Private Operating For			A, question 9)		
1 à If the foundation has received a ruling or d					
foundation, and the ruling is effective for 2	•	•	► L		//
b Check box to indicate whether the foundation		foundation described in		4942(j)(3) or 4942	(f)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2019	(h) 2010	Prior 3 years (c) 2017	(d) 2016	(a) Tatal
income from Part I or the minimum	(4)2019	(b) 2018	(6) 2017	(u) 2010	(e) Total
investment return from Part X for	170	150	100	7.4	F 2.1
each year listed	170.	158.	129.	74.	531.
b 85% of line 2a	145.	134.	110.	63.	451.
c Qualifying distributions from Part XII,	20 000	20 000	40 000	20 000	100 000
line 4, for each year listed	29,000.	20,000.	40,000,	20,000.	109,000.
d Amounts included in line 2c not					
used directly for active conduct of		<u> </u>			0
exempt activities	0.	0.	//0.	0.	0.
e Qualifying distributions made directly					
for active conduct of exempt activities.	20 000	20.000	///	20 000	100 000
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the	29,000.	20,000.	40,000.	20,000.	109,000.
alternative test relied upon:					
a "Assets" alternative test - enter:			/		0
(1) Value of all assets		//			0.
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0.
b "Endowment" alternative test - enter 2/3 of minimum investment return			İ	j	
shown in Part X, line 6, for each year					
listed	2,169.	//2,058.	1,927.	1,585.	7,739.
c "Support" alternative test - enter:		//	,		
(1) Total support other than gross investment income (interest, dividends, rents, payments on	X		; 		
securities loans (section 512(a)(5)), or royalties)					0.
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					0.
(3) Largest amount of support from					
an exempt organization					0.
(4) Gross investment income					0.
Part XV Supplementary Inform			f the foundation	had \$5,000 or mor	e in assets
at any time during the	year-see instru	ctions.)			
1 Information Regarding Foundation	Managers:				
a List any managers of the foundation who ha			butions received by the f	oundation before the close	of any tax
year (but only if they have contributed more	tnan \$5,000). (See sec	tion 50/(a)(2).)			
NONE					

NONE

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here Fig. 1 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

SEE STATEMENT 8

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Purpose of grant or show any relationship to any foundation manager or substantial contributor **Amount** status of contribution Name and address (home or business) recipient a Paid during the year AMANDA CUBBERLY (PAID TO THE CULINARY ACTIVE EDUCATION INSTITUTE OF AMERICA) 1946 CAMPUS DRIVE HYDE PARK, NY 12538 2,500. ANNA SMITH (PAID TO DREW UNIVERSITY) ACTIVE EDUCATION 36 MADISON AVENUE MADISON, NJ 07940 2,500. ACTIVE EDUCATION BRIDGET R. STEWART (PAID TO NASSAU COMMUNITY COLLEGE) ONE EDUCATION DRIVE 2,500. GARDEN CITY, NY 11530 DANIELLE RAGAN (PAID TO VIRGINIA ACTIVE EDUCATION TECH) 800 DRILLFIELD DRIVE BLACKSBURG, VA 24061 2,500. DELIA NOONE (PAID TO THE COLLEGE OF ACTIVE EDUCATION NEW JERSEY) 200 PENNINGTON ROAD EWING, NJ 08628 2,500. SEE CONTINUATION SHEET(S) **▶** 3a 29,000. Total **b** Approved for future payment NONE **▶** 3b Total

Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business income		ded by section 512, 513, or 514	(e)
	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion code	Amount	function income
a	1				
b					
C					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	170.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate;		· · · · · · · · · · · · · · · · · · ·		, , , ,	<u> </u>
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
C					
d					
e					
2 Subtotal. Add columns (b), (d), and (e)) .	170.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	170.
See worksheet in line 13 instructions to verify calculations.)					

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).	
	,	
		-
	Form QQQ DE	/2010

Pan	-XVII	Information F Exempt Orga		ng Trans	fers to a			and Rela	tions	nips With	Nonchar	itable		gc 10
1 D	id the or	ganization directly or inc	irectly eng	age in any o	f the followin	ig with any o	ther organizati	ion described	d ın secti	on 501(c)		15.5	Yes	No
		n section 501(c)(3) orga	-				_	?				15.4°	417 to 7	
		from the reporting foun				_						4.12	472122 7753-57	
(1) Cash					<i></i> .						1a(1)	_	X
(7	2) Other	assets			••							1a(2)		X
		sactions;												
		of assets to a noncharit										1b(1)		X
		ases of assets from a ne								•		1b(2)		X
		l of facilities, equipment oursement arrangement								•••		1b(4)		X
		or loan guarantees							••			15(5)		X
		mance of services or m										1b(6)		X
		facilities, equipment, m										1c	Х	
		er to any of the above is								arket value of	the goods, o	ther as	ets,	
		given by the reporting												
CO) the value of the goods,	other asse	ets, or servic	es received.									
eni3(S)	no	(b) Amount involved	L		oncharitable					of transfers, tran		shaving ar	rangeme	nts
<u>1C</u>		0,	IUEC	LOCAL	UNIO	N NO.	1	SEE	STA	TEMENT	9			
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											· · · · · · · · · · · · · · · · · · ·			
		fation directly or indirec				or more tax	exempt organ	izations desc	cribed					
		01(c) (other than section		3)) or in sect	on 527?						,,, ⊔	Yes	<u> </u>	_l No
b If "	Yes," cor	nplete the following sch				(A) To a co		· · · · · · · · · · · · · · · · · · ·		-> Danamation	of relational			
TITEC	1 00	(a) Name of org	ganization			(B) Type o	organization	SEE		c) Description		нр		
IUEC	. 1.00	WI I				301(0) 3	SEE .	STAI	CMENT	10			
		 -		 				<u> </u>		 	· · · · · · · · · · · · · · · · · · ·		-	
								 						
	· <i>·</i> · · · · ·									·				
	Under p	analties of perjury, I declare	that I have e	xamined this ri	eturn, including	accompanyii	ng schedules and	statements, ar	nd to the	best of my know!	edge	the IAS	d sauce	
Sign	and belo	ef, it is true correct, and cor	nplete Pecla	vation of prepa	erer (other than	taxpayer) is b	ased on all inform	nation of which	preparer	has any knowled	ge retu	m with th wa be'ow	e prepare	er
Here		MWZ,	M			14	27/20	Sec	reton	-Treasu	1 (Yes] No
	Signa	ture of officer or trustee				Date		Title						
	11	Print/Type preparer's na	ıme	F	reparer's sig	nature	7.	Date	\Box	Check	II PTIN			
	1	DANIEL A W	INTER	rs /	1	41	1	111	/	self- employed				
Paid	L	CPA		×	Land	UWIN	les Cra		107			175		
Prepa	arer [irm's name ► DAN	IEL A	. WIN	TERS 8	COMI	PANY, C	PAS /		Firm's EIN	23-25	867	36	

Phone no. 610-358-2000

Paid Preparer **Use Only**

Firm's address ▶ 6 DICKINSON DR STE 205

CHADDS FORD, PA 19317

3 . Grants and Contributions Paid During the Ye	· · · · · · · · · · · · · · · · · · ·			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
FIONA L. MOORE (PAID TO NEW JERSEY		ACTIVE	EDUCATION	
CITY UNIVERSITY)		nerry n	DESCRIPTION	
2039 KENNEDY BOULEVARD		1		
JERSEY CITY, NJ 07305				1,00
HALEY M. DAVIS (PAID TO JOHN JAY		ACTIVE	EDUCATION	•
COLLEGE OF CRIMINAL JUSTICE)		ł	.	
524 W. 59TH ST.			1	
NEW YORK, NY 10019	-	 	 	1,000
JACQUELINE ROSSI (PAID TO EAST		ACTIVE	EDUCATION	
CAROLINA UNIVERSITY)				
EAST 5TH STREET		1	1	
GREENVILLE, NC 27858		<u> </u>		2,500
THE TA DEMARKS (DATE TO DESC.		ACMITY	EDUCATION	
JULIA DEMARZO (PAID TO PACE	1	ACTIVE	EDUCATION	
UNIVERSITY)				
1 PACE PLAZA			[2,500
NEW YORK, NY 10038		<u></u>		2,300
MATTHEW MCGUINNESS (PAID TO		ACTIVE	EDUCATION	
UNIVERSITY OF SOUTH CAROLINA)				
COLUMBIA-CAMPUS				
COLUMBIA, SC 29208				1,000
VICOLUMNE DIDATMONDO (DATO MO		A CMILLER	EDUCA BLON	
NICOLETTE DIRAIMONDO (PAID TO UNIVERSITY OF DELAWARE)		ACTIVE	EDUCATION	ı İ
104 HULLIHEN HALL				
NEWARK, DE 19716				2,500
SARAH PULIS (PAID TO STONY BROOK		ACTIVE	EDUCATION	
UNIVERSITY)			(l
310 ADMINISTRATION BUILDING				
STONY BROOK, NY 11794	· · · · · · · · · · · · · · · · · · ·	 	 	2,500
STEVEN DIRAIMONDO (PAID TO CLEMSON		ACTIVE	EDUCATION	
UNIVERSITY)				
201 SIKES HALL				
CLEMSON, SC 29634	<u> </u>			2,500
WALL MOODE (DAYS TO NEW TOTAL)		A COUNTY	EDICAMIC!	
VALARIE MOORE (PAID TO NEW JERSEY		ACTIVE	EDUCATION	
CITY UNIVERSITY)		ļ		
2039 KENNEDY BOULEVARD		[1,000
JERSEY CITY, NJ 07305		 		1,000
j		1		
		:		
		1		
		L	<u></u>	16,500

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

2019

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IUEC LOCAL 1 OF NYC SCHOLARSHIP FUND

Employer identification number

13-3251442

Organi	zation type (check of	oné)·	
Filers o	of:	Section:	
Form 9	90 or 990-EZ	501(c)() (enter number) organization	
		4947(a)(1) nonexempt charatable trust not treated as a private foundation	
		527 political organization	
Form 99	90-PF	X 501(c)(3) exempt private foundation	
		4947(a)(1) nonexempt charitable trust treated as a private foundation	
		501(c)(3) taxable private foundation	
Note: C	only a section 501(c)	is covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule Sec	e instructions
Genera	l Rule		
X	•	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,00 one contributor. Complete Parts I and II. See instructions for determining a contributor's total	•
Special	Rules		
	sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b or, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (1, line 1) Complete Parts I and II	o, and that received from
	year, total contribu	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990·EZ that received from any on utions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational try to children or animals. Complete Parts I, II, and III.	
	year, contributions is checked, enter h purpose Don't con	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any on secularized for religious, charitable, etc., purposes, but no such contributions totaled more that here the total contributions that were received during the year for an exclusively religious, charitable any of the parts unless the General Rule applies to this organization because it receives, etc., contributions totaling \$5,000 or more during the year	n \$1,000 If this box table, etc ,
		hat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 99	

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

IUEC	LOCAL 1 OF NYC SCHOLARSHIP FUND] 1:	3-3251442
Part I	Contributors (see instructions). Use duplicate copies of Part I if add	litional space is needed.	_
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LOCAL NO. 1 ELEVATOR CONSTRUCTORS UNION OF NEW YORK AND VICI 47-24 27TH STREET LONG ISLAND CITY, NY 11101	s12,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution

Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

IUEC LOCAL 1 OF NYC SCHOLARSHIP FUND

13-3251442

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.						
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received				
		- - - - \$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received				
		- - - - \$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		- - - - \$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		- - - \$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		\$					
(a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				

Name of org	ganization			Employer identification number					
IUEC L	LOCAL 1 OF NYC SCHOLARSH	IIP FUND		13-3251442					
Part	Exclusively religious, charitable, etc., contribute	ns to organizations described in s	section 501(c)(7), (8), or (10)						
	completing Part III, enter the total of exclusively religious, ch	antable, etc., contributions of \$1,000 or	itry For organizations less for the year (Enter this info one	se)▶\$					
(a) No.	Use duplicate copies of Part III if additional s	pace is needed							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held					
Parti		<u>.</u>							
1									
-		(e) Transfer of gift	•	 					
		(e) Transier of gir	•						
	Transferee's name, address, and	1 ZIP + 4	Relationship of tra	nsferor to transferee					
1									
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held					
Part I	 								
-		(a) Transfer of gift	<u> </u>						
	(e) Transfer of gift								
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee								
			· 						
									
(-) (-)									
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held					
Faiti				······································					
			<u> </u>						
<u> </u>	(e) Transfer of gift								
	(a, .;a.								
-	Transferee's name, address, and	ZIP + 4	Relationship of tra	nsferor to transferee					
-									
(a) No.									
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held					
<u> </u>									
-									
-	(e) Transfer of gift								
1									
-	Transferee's name, address, and	ZIP + 4	Relationship of tra	nsferor to transferee					
-									

FORM 990-PF INTEREST ON SAV	INGS AND TEM	IPORARY	CASH I	NVESTMENTS	STATE	MENT	1
SOURCE	(A REVE PER B	NUE			(C) ADJUSTED NET INCOME		
AMALAGAMATED BANK		170.		170.		1'	70.
TOTAL TO PART I, LINE 3		170.			170.		
FORM 990-PF	TAX	ES			STATE	MENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	NET IN	VEST-	(C) ADJUSTED NET INCOM	CH.	ARITA	
NEW YORK STATE DEPARTMENT OF LAW UNITED STATES TREASURY	50. 2.		0.		0.		0.
TO FORM 990-PF, PG 1, LN 18	52.	====	0.		0.	====	0.
FORM 990-PF	OTHER E	XPENSES			STATE	MENT	3
DESCRIPTION		NET IN		(C) ADJUSTED NET INCOM	CH.	(D) ARITAI URPOSI	
BANK SERVICE CHARGE INSURANCE	4. 376.	· 1	0.	······································	0.		0.
TO FORM 990-PF, PG 1, LN 23	380.		0.	——————————————————————————————————————	0.		0.
FORM 990-PF OTHER INCREASES	S IN NET ASS	ETS OR	FUND BA	ALANCES	STATE	MENT	4
DESCRIPTION					AM	TNUC	
ADJUSTMENT FOR SCHOLARSHIPS P	REVIOUSLY D	ISBURSE	D			10,46	50.
TOTAL TO FORM 990-PF, PART II	I, LINE 3					10,46	50.

FORM 990-PF OTH	ER LIABILITIES		STATEMENT	5	
DESCRIPTION		BOY AMOUNT	EOY AMOUNT		
SCHOLARSHIPS PAYABLE	-	80,398.	69,9		
TOTAL TO FORM 990-PF, PART II, LINI	E 22	69,938.			
NAME OF CONTRIBUTOR	ADDRESS				
LOCAL NO. 1 ELEVATOR CONSTRUCTORS	47-24 27TH ST	REET			
UNION OF NEW YORK AND VICINITY	LONG ISLAND C	ITY, NY 11101			
SCHINDLER ELEVATOR	20 WHIPPANY ROMORRISTOWN, NO				
THYSSENKRUPP ELEVATOR	2600 NETWORK BLVD., SUITE 450 FRISCO, TX 75034				

	LIST OF OFFICERS, D AND FOUNDATION MANA		STAT	EMENT 7		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB			
JOSEPH HOULAHAN 47-24 27TH STREET LONG ISLAND CITY, NY 11101	PRESIDENT 1.00	0.	0.	0.		
MICHAEL RIEGGER 47-24 27TH STREET LONG ISLAND CITY, NY 11101	SECRETARY - TR 1.00	EASURER 0.	0.	0.		
WILLIAM BULGER 47-24 27TH STREET LONG ISLAND CITY, NY 11101	TRUSTEE 1.00	0.	0.	0.		
JOHN HOOK 47-24 27TH STREET LONG ISLAND CITY, NY 11101	TRUSTEE 1.00	0.	0.	0.		
BRIAN FIELDER 47-24 27TH STREET LONG ISLAND CITY, NY 11101	TRUSTEE 1.00	0.	0.	0.		
TOTALS INCLUDED ON 990-PF, PAG	GE 6, PART VIII	0.	0.	0.		

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION
PART XV, LINES 2A THROUGH 2D

STATEMENT

8

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

MICHAEL RIEGGER 47-24 27TH STREET LONG ISLAND CITY, NY 11101

TELEPHONE NUMBER

718-767-7004

FORM AND CONTENT OF APPLICATIONS

WRITTEN FORM, INCLUDE COPY OF LETTER OF ACCEPTANCE FROM THE COLLEGE THE INDIVIDUAL PLANS TO ATTEND

ANY SUBMISSION DEADLINES

DECEMBER 31, 2019

RESTRICTIONS AND LIMITATIONS ON AWARDS

COLLEGE MUST BE ACCREDITED AND GRANT AN ASSOCIATE'S OR BACHELOR'S DEGREE

990-PF

INVOLVEMENT WITH NONCHARITABLE ORGANIZATIONS
PART XVII, LINE 1, COLUMN (D)

STATEMENT

9

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

IUEC LOCAL UNION NO. 1

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

TUEC LOCAL UNION NO. 1 SHARED OFFICE SPACE WITH THE LOCAL NO. 1 SCHOLARSHIP FUND

990-PF AFFILIATION WITH TAX-EXEMPT ORGANIZATIONS PART XVII, LINE 2, COLUMN (C)

STATEMENT 10

NAME OF AFFILIATED OR RELATED ORGANIZATION

IUEC LOCAL 1

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION

ALL OF THIS FUND'S TRUSTEES ARE OFFICERS OF LOCAL 1