2949313516604

Return of Organization Exempt From Income Tax

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

2010

Department of the Treasury Internal Revenue Service

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

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

uonsj	
M.M	/ Open to Public
עיו ע	Open to Public Inspection
115	<b>Estinspection</b>

A F	or the 2019	calendar year, or tax year beginning	2019, and ending	t i	, 20
		C Name of organization		D Employer Identific	ation number
E Ch	eck if applicable	Performing Arts Consultants, Inc.	•		
	Address change	Doing business as	Ş.	22-25230	52
	Name change	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephone numbe	
	Initial return	807 Mantoloking Road Suite 100		732-670-	6114
	Final return/	City or town, state or province, country, and ZIP or foreign postal code		732 070	<u> </u>
	terminated Amended	Brick, NJ 08723		G Gross receipts \$	
-	Application	F Name and address of principal officer	2	H(a) is this a group rei	um for Yes X N
	pending	·		subordinates?  H(b) Are all subordinates	
1 1	Tax-exempt st	atus X 501(c)(3) 501(c)( ) ◀ (insert no ) 494	7(a)(1) or 52	<del></del> 1 ' '	a list (see instructions)
	Vebsite: ▶	X 301(0)(3)   301(0)( )   (macrimo)   434	7(2)(1701-54) 2 3 52	H(c) Group exemption	•
	orm of organ	ization X Corporation Trust Association Other	1 Year o	<del></del>	e of legal domicile
		mmary	1 2 1001 0	The State	e or regar connenc
		describe the organization's mission or most significant activities. Ec	ducational	vnorionas for	otudonts
ایه		n elementary school through college leve			
ĕ		petitions for music students	i, includii	ig music restry	ars and
Ĕ		this box I if the organization discontinued its operations or	disposed of more the	an 25% of its not sensite	
Governance		·	•	1	1
		er of voting members of the governing body (Part VI, line 1a)			
ctivities &		er of independent voting members of the governing body (Part VI, lin			
ξ		number of individuals employed in calendar year 2019 (Part V, line 2a			10
AC.		number of volunteers (estimate if necessary)		•	
		unrelated business revenue from Part VIII, column (C), line 12			
$\rightarrow$	b Net u	prelated business taxable income from Form 990-T, line 39	<del></del>		2
				Prior Year	Current Year
힘		butions and grants (Part VIII, line 1h)			
Revenue		am service revenue (Part VIII, line 2g)			
		ment income (Part VIII, column (A), lines 3, 4, and 7d)		7,217.00	159,345.00
1		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			
		evenue - add lines 8 through 11 (must equal Part VIII, column (A), lin			11,030,004.00
İ		s and similar amounts paid (Part IX, column (A), lines 1-3)		·	
- 1		its paid to or for members (Part IX, column (A), line 4)	1		ļ
es		es, other compensation, employee benefits (Part IX, column (A), lines		599,398.00	658,367.00
sua	16 a Profe	ssional fundraising fees (Part IX, column (A), line 11e)			
Expenses	<b>b</b> Total	fundraising expenses (Part IX, column (D), line 25) ▶			
ш	17 Other	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		9,215,235.00	9,136,746.00
1	18 Total	expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		9,814,633.00	9,795,113.00
	19 Rever	ue less expenses Subtract line 18 from line 12		516,330.00	1,234,891.00
es o			· · · · · · · · · · · · · · · · · · ·	Beginning of Current Year	End of Year
Assets 1 Balanc	20 Total	assets (Part X, line 16)		2,690,509.00	3,925,400.00
A Ba		labilities (Part X, line 26)			
됐인		ssets or fund balances Subtract line 21 from line 20		2,690,509.00	3,925,400.00
Pa		nature Block			
Und	er penalties o	of perjury, I declare that I have examined this return, including accompanying	schedules and staten	nents, and to the best of my	knowledge and belief it
true	, correct, and	complete Declaration of preparer (other than officer) is based on all information		s any knowledge	
			C)	R	FCEIVED IN COR
Sig	n   🗗 🥫	ighative of officer		Date	ECEIVED IN COR IRS - OSC - 22
Her	e		v.		0 - 030 - 22
		ype or print name and title			APR 1 9 2024
		Type preparer's name Preparer's signature	Date	Check If	PTIN 1 2 2021
Paid	,	Borbero & Borbero		Check if self-employed	
Prep				<del></del>	OGDEN, UTAH
Use		name ▶ Arthur Barbera, CPA			
		address ► 70 Floral Avenue, Murray Hill, No.		Phone no 908	-464-5747
		iscuss this return with the preparer shown above? (see instru		<u> </u>	. Yes No
For I	Paperwork	Reduction Act Notice, see the separate instructions.	) } !	$\bigcirc$	Form 990 (2019

VII, VIII, IX, or X as applicable.



Form 990 (2019) **Checklist of Required Schedules** Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," Is the organization required to complete Schedule B, Schedule of Contributors' (see instructions)? . . . . . . . . Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to

domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II .

Yes No 1 Х 2 Х 3 Х Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) Х 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 98-197 If "Yes," complete Schedule C, Part III Х 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 6 Х Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II......... Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," Х 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 9 <u>X</u> Did the organization, directly or through a related organization, hold assets in donor-restricted endowments 10 Х If the organization's answer to any of the following questions is "Yes," then complete Schedule D. Parts VI, a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," 11a Х b Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more 11b X 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.......... Х d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X . . . . . . 11e Х 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 X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a X b Was the organization included in consolidated, independent audited financial statements for the tax year? If Х "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E. . . . . . . . . . 13 Х 14a Х 14a Did the organization maintain an office, employees, or agents outside of the United States?......... 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 Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other Х Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 X Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 Х Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 Х 20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . . . . . . . . . . . 20a Х b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . . . Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part X, column (A), line 27 if "Yes," complete Schedule I, Parts I and III .  22 X  23 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part X, column (A), line 27 if "Yes," complete Schedule I, Parts I and III .  24 Did the organization are "Yes" to Part VII. Section A, line 3.4, or 5 about compensation of the organization have at tax-exempt bond issue with an outstanding principal amount of more than \$100,000 so frie last day of the year, that was issued after December 31, 2022 if "Yes," are "rines 240 through 24d and complete Schedule K. If "No," go to line 25a .  25 Did the organization maintain an escrow account other than a refunding secrow at any time during the year to defease any trax-exempt bonds?  26 Did the organization act as an "on behalf of issue for bonds outstanding at any time during the year 2.  27 Did the organization act as an "on behalf of issue for bonds outstanding at any time during the year 2.  28 Section 501((2)4), 501((2)4), and 501((2)4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.  28 Did the organization exert stat it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part II.  29 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any currents or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of ramy of these persons? If "Yes," complete Schedule L, Part II.  29 Did the organization party to a business transaction with one of the following parties (see Schedule L, Part IV "Yes," complete Schedule L, Part IV.  29 Did the organization related a grant or other assistance to any current or former officer, director, trustee, k		in the second se			
Test   No   Part   Par	Form 9	90 (2019)			age 4
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 27 If "Yes," complete Schedule I, Parts and III".  23 Did the organization reswer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization reswer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization have at tax-exempt bond issue with an outstanding principal amount of more than \$100,000 so of the last day of the year, that was issued after December 31, 2002? If "Yes," are writing \$24 about the organization have at tax-exempt bond issue with an outstanding brincipal amount of more than \$100,000 so of the last day of the year, that was issued after December 31, 2002? If "Yes," are writing \$24 about the organization maintain an escrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds?  3 bill the organization analytain an escrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds?  4 bill the organization and tas an "on behalf of issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds.  5 a Section \$5(1)(3), \$91(1)(4), and \$91(1)(2)9 organizations. Dut the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I.  5 bill the organization exercise that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part II.  5 bill the organization oreport any amount on Part X, line \$5 or 22, for receivables from or payables to any current or former officer, circustor, trustee, key employee, creator or founder, substantial contributor, or 35% controlled antity of family member of any of these persons? If "Yes," complete Schedule I, Part II.  5 bill the organization expert with a second part of these persons? If "Yes," complete Schedule I, Part II.  5 bill the organi	Part	Checklist of Required Schedules (continued)			
Part IX. column (A), line 27 (If "Yes," complete Schedule I, Parts I and III organization regardization recovery "Yes" to Part IVI, Section A, file 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 I, A sussessing the part of				Yes	No
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 offices, directors, trustess, key employees, and highest compensation of the property if "Yes," complete Schedule J, and the standard 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," or to line 25e					v
organization's current and former officers, directors, trustees, key employees, and highest compensated employees' If "Pes," complete Schedule I. Part II.  24.1 24.1 2016 the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the least day of the year, that was issued after December 31, 2002? If "Pes," answer lines 246 through 24d and complete Schedule K. If "No." go to line 25a.  24d bt organization maintain an escrow account other than a refunding escrow at any time during the year to delease any tax-exempt bonds? 24d X.  25a Section \$01(c)(3), \$01(c)(4), and \$01(c)(29) organizations. 20 the organization engage in an excess benefit transaction with a disqualided person during the year? If "Yes," complete Schedule I. Part I.  25b Is the organization aware that it engaged in an excess benefit transaction with a disqualided person during the year? If "Yes," complete Schedule I. Part II.  25c Ib Id the organization aware that it engaged in an excess benefit transaction with a disqualided person in a prince year, and that the transaction has not been reported on any of the organizations prior forms 900 or 990-627 If "Yes," complete Schedule I., Part II.  25b 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 35% controlled entity of ramity member of any of these persons? If "Yes," complete Schedule I., Part II.  25c Was 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) of family member of any of these persons? If "Yes," complete Schedule I., Part III.  26c A 35% controlled entity of one or more individuals and/or organizations geacried on lines 28a or 28b? If "Yes," complete Schedule II., Part II.  27c Did the organization repote one may 525,000 in non-cash contributions? If If Yes, complete Schedule II.			22		_ X
employees? If "Yes," complete Schedule J.  24 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 25e .  25 Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  26 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  27 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  28 Section 501(5(3), 501(6)4), and 501(6)2(9) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.  28 Section 501(6)31, 501(6)4), and 501(6)2(9) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a principle via 17 Section of the s	23				
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2027 if "res" answer lines 24 bit horsup? 24d and complete Schedule K if "No." of to line 25a.  25b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to delease any tax-exempt bonds?  25c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to delease any tax-exempt bonds?  25d Section \$01(c)(3), \$01(c)(4), and \$01(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualided person during the year? If "Yes," complete Schedule L, Part I.  25d b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.  25d b Did the organization has not been reported on any of the organizations prior forms 990 or 990-E72 If "Yes," complete Schedule L, Part I.  25d 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 35% controlled entity of rainly member of any of these persons? If "Yes," complete Schedule L, Part II.  25d Was the organization party to a business transaction with one of the following parties (see Schedule L, Part III).  26d Vas the organization aparty to a business transaction with one of the following parties (see Schedule L, Part III).  27d Vas the organization release to many 25,000 in non-cash contributions? If "Yes," complete Schedule L, Part III.  28d Was the organization sell, exchange, dispose of, or transfer more than 25% of its net assets. or qualified to propagarization release to mission sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule R, Part II, III.  27d Did the organization release to not passed the entity o			23		v
\$ 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 compiler Schedule K. If No," of to line 25a.  \$ b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24 2				_
b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  d) Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  d) Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  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 I. Part I.  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 organizations prior forms 990 or 990-E27 If "Yes," complete Schedule I. Part I.  b is the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of mainty member of any of these persons If "Yes," complete Schedule L. Part II.  Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, or to a 35% controlled entity (including an employee thereof) of family member of any other parts of the propriets of the propriets Schedule L. Part III.  A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L. Part IV.  A Carlot or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L. Part IV.  A Carlot or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L. Part IV.  Did the organization individual described in line 28a? If "Yes," complete Schedule II. Part IV.  Did the organization individual described in line 28a? If	24 a			ĺ	
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?			24a		x
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?.  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	ь	· · · · · · · · · · · · · · · · · · ·			Х
to defease any tax-exempt bonds?.  d Old the organization at as an "on behalf of "issuer for bonds outstanding at any time during the year?.  246					
25a Section 501(c)(13), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year // "res," complete Schedule L, Part I.  25b 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.  25c 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.  27c Did the organization reviews 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), agrant selection committee member, or to a 35% controlled entity (including an employee thereof), agrant selection committee member, or to a 35% controlled entity (including an employee thereof), agrant selection committee member, or to a 35% controlled entity of a business transaction with one of the following parties (see Schedule L, Part IV.)  28 Was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV.)  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV.  29 Did the organization receive more than \$25,000 in non-cash contributions? If Yes," complete Schedule IV.  29 Did the organization with a selection \$100,000 in non-cash contributions? If Yes," complete Schedule IV.  29 Did the organization with a selection \$100,000 in non-cash contributions? If Yes," complete Schedule IV.  29 Did the organization organization apart		•	1		Х
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 sequence of the property of 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 X Y 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 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III. 26 X Y 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part III "Yes," complete Schedule R	d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Х
b Is the organization aware that it engaged in an excess benefit fransaction 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	25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27  If "Yes," complete Schedule L, Part I.  25 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 X  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) of family member of any of these persons? If "Yes," complete Schedule L, Part III.  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):  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.  b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.  28 Did the organization receive more than \$25,000 in non-cash contributions? If If Yes," complete Schedule M.  29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.  29 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I.  30 Did the organization on related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III.  30 Did the organization included termination of any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III.  31 Did the organization have a controlled entity within the meaning of section 5				<u> </u>	X
Brace   Complete Schedule   Part	b			l	
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.  25 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) of family member of any of these persons? If "Yes," complete Schedule L, Part III.  27 Zeart IV instructions, for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.  b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.  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.  30 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.  31 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.  31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.  32 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. II.  33 Ly Was the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 512(b)(13)? If "Yes," complete Schedule R, Part I, III.  34 Ly Was the organization own 100% of an entity disregarded as separate fro					
or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% zontrolled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II. 28 zeroson? If "Yes," complete Schedule L, Part II. 28 zeroson? If "Yes," complete Schedule L, Part III. 28 zeroson? If "Yes," complete Schedule L, Part III 28 zeroson? If "Yes," complete Schedule L, Part III 28 zeroson? If "Yes," complete Schedule L, Part III 28 zeroson? If "Yes," complete Schedule L, Part III 28 zeroson? If "Yes," complete Schedule L, Part IV 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV 35% complete Schedule L, Part IV 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV 35% complete Schedule L, Part IV 35% complete Schedule L, Part IV 35% complete Schedule M 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV 35% complete Schedule M 35% and 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If 35% and				<u> </u>	X
controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26				
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) of family member of any of these persons? If "Yes," complete Schedule L, Part III.  27 X  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):  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.  b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.  c A 35% controlled entity of one or more individuals and/or organizations gescribed in lines 28a or 28b? If "Yes," complete Schedule L, Part IV.  28 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part II.  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part II.  29 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.  20 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. ".  20 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III.  21 Orl the organization have a controlled entity within the meaning of section \$12(b)(13)? "Yes," complete Schedule R, Part V, Iine 2.  23 Did the organization own lower of section \$12(b)(13)? If "Yes," complete Schedule R, Part V, Iine 2.  24 Did the organization own lower of section					U
empfloyee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) of tamily member of any of these persons? If "Yes," complete Schedule L, Part III	27			$\vdash$	<u>  ^</u>
member, or to a 35% controlled entity (including an employee thereof) of family member of any of these persons? If "Yes," complete Schedule L, Part III.  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):  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.  b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.  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.  28b	21				1
persons? If "Yes," complete Schedule L, Part III				ĺ	
Was the organization a party to a business transaction with one of the following parties (see Schedule L. Part IV instructions, for applicable filling thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.  b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.  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.  28 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.  29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.  30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II.  30 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.  31 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 II. III.  32 or IV, and Part V, line 1.  33 Did the organization have a controlled entity within the meaning of section 512(b)(13)?  34 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 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 V, line 2.  35 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, line 2.  36 Section 501(c)(3) organizations are required to complete Schedule O.  37 Did the organization complete Schedule O and provide explanations in Schedule O f		$\boldsymbol{p}$			x
Part IV instructions, for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28				
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? II "Yes," complete Schedule L, Part IV				ĺ	
"Yes," complete Schedule L, Part IV. 28a	a				l
c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If				<u> </u>	<u> x</u>
"Yes," complete Schedule L, Part IV.  29 Did the organization receive more than \$25,000 in non-cash contributions? If If Yes," complete Schedule M.  29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.  30 X  31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II  30 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.  31 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 II. III, or IV, and Part V, line 1.  32 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part III, III, or IV, and Part V, line 1.  33 L X  34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.  35 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 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 X  37 Did the organization complete Schedule R, Part V, line 2.  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 fillers are required to complete Schedule O.  4 Enter the number reported in Box 3 of Form 1096. Enter O- if not applicable  4 De Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  5 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  5 Parm 990 (201)				ļ	Х
Did the organization receive more than \$25,000 in non-cash contributions? Iffe'yes," complete Schedule M	С			İ	
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		"Yes," complete Schedule L, Part IV	28c	—	X
conservation contributions? If "Yes," complete Schedule M.  Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31			29	$\vdash$	X
Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	30		20	ļ	,
Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.  32 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. the sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part II. the orly, and Part V, line 1	0.4			<del>                                     </del>	
Source   Complete Schedule N, Part II.   32    X    32    X    33    34    X    34    35    36    37    37    37    38				<del>                                     </del>	<del>  ^</del> -
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	32				\ <sub>V</sub>
sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I. !!	22			<del></del>	-
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	33				x
or IV, and Part V, line 1	34				
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	٠.				х
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	35 a				Х
controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2					
related organization? If "Yes," complete Schedule R, Part V, line 2				<u> </u>	Х
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 X  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O. 38 X  Part V Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V	36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			1
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI			<del></del>	<u> </u>	X
Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.  Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V  1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	37			ļ	
19? Note: All Form 990 filers are required to complete Schedule O.  Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V  1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable				├	X
Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V  1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	38	· · · · · · · · · · · · · · · · · · ·		ł	١
Check if Schedule O contains a response or note to any line in this Part V	Sec.		1 38	Ц	<u>  X</u>
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	Har				
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Uneck if Schedule U contains a response of note to any line in this Part V	••••	Yes	· No
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		Enter the number reported in Box 3 of Form 1006. Enter 0 if not applicable.		<del> </del>	1
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			7		
reportable gaming (gambling) winnings to prize winners?			al l		]
JSA Form 990 (201)	С			İ	x
		arkappa	Form	990	

Form !	990`(2019) .			Page 5
Par		_		age 5
-	<u> </u>		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a			ł
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	x	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		х
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		X
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			,
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		<u> </u>
b	If "Yes," enter the name of the foreign country ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			1
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a_	<u> </u>	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		X
6 a	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		<u>X</u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			İ
	gifts were not tax deductible?	6b		X
7	Organizations that may receive deductible contributions under section 170(c).			l
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		X
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	.7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year	,. 1		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<u>X</u>
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		·X
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C7.	7h		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			,
_	sponsoring organization have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.	0.0		V
	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b		X
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	30		
10	Section 501(c)(7) organizations. Enter:	,		l
	Initiation fees and capital contributions included on Part VIII, line 12	1		
11	Section 501(c)(12) organizations. Enter:	i		
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources	1		l
	against amounts due or received from them.)			Į
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	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.			
ь	Enter the amount of reserves the organization is required to maintain by the states in which			
_	the organization is licensed to issue qualified health plans	1		1
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
	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	<u></u>	
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		
	If "Yes," complete Form 4720, Schedule O.			<u>L                                     </u>
		Form	990	(2019)

	90 (2019)			Page 6
Part				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. S			lions.
	Check if Schedule O contains a response or note to any line in this Part VI	• • •		
Secti	on A. Governing Body and Management			
	1 1 1		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year   1a   4			
	If there are material differences in voting rights among members of the governing body, or			1
	if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			1
	any other officer, director, trustee, or key employee?	2		X
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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			l
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
. '	the year by the following:			
а	The governing body?	8a	Х	<u> </u>
, p	Each committee with authority to act on behalf of the governing body?	8b	· X	<u> </u>
. 9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at		,	٠.
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code		
•	· · · · · · · · · · · · · · · · · · ·		Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
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		X
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? .	<u>11a</u>		<u> </u>
b				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	401		١.,
	rise to conflicts?	12b		X
C	Did the organization regularly and consistently monitor and enforce combinance with the policy? If "Yes,"	40-		,
	describe in Schedule O how this was done	12c		X
13	Did the organization have a written whistleblower policy?	13	X	<del> </del>
14	Did the organization have a written document retention and destruction policy?	14	Х	├
15	Did the process for determining compensation of the following persons include a review and approval by	1	İ	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	150	l	,
а	The organization's CEO, Executive Director, or top management official	15a 15b		X
b		130	<del>                                     </del>	<del>  -</del>
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		[	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	16a	[	X
	with a taxable entity during the year?	IUa		<del>  ^-</del>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		x
Coot		100	<u> </u>	1 ~
	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed New Jersey	10-	die - '	04/
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-7	(Sec	uon t	) T U(
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  Own website  Another's website  X Upon request  Pther (explain on Schedule O)			
		£ ;		!!
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of	ınte	rest p	Olica
	and financial statements available to the public during the tax year.	l_ =		
20	State the name, address, and telephone number of the person who possesses the organization's books and record	is 🟲		
	Mike Mazzarisi 807 Mantoloking Rd, Brick, NJ 08723		000	

• ,				
Form 990 (2019)				

_	-
Page	1

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 it fieldler the organization nor	any relateu	uiga	IIIZa	illon	COI	iipeii	Sac	any current onic	er, director, or trus	,
		Ì		(0	C)					
(A)	(B)			Pos	ation			(D)	(E)	(F)
Name and title	Average	(do r	ot c	heck	more	than c	ne	Reportable	Reportable	Estimated amount
,	hours	box,	unle	ss pe	rson	ıs both	an	" compensation	compensation	of other
	per week	office	er and	dad	lirect	or/trust	lee)	from the	from related	compensation
,	(list any	2 5	5	0	Ž.	œТ	'n	organization	organizations	from the
· ·	hours for	교호	<u>≅</u>	Officer	ey e	필요	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and
1 11	related	ect	듷	۳ ا	Key employee	sst o	ª			related organizations
$\cdot$ $\cdot$ $\cdot$ $\cdot$ $\cdot$ $\cdot$ $\cdot$ $\cdot$ $\cdot$ $\cdot$	organizations	9 5	<u>a</u>		ş	l " j		<b>ት</b> ' ' '	}	
	below dotted line)	Individual trustee or director	Institutional trustee	]	ìĕ	Highest compensated employee	]	1.00		
( · · · · ,	dolled line)	n n	itee			158	ļ	í		
		<u> </u>	1			<u> </u>		٠.		
•				'	1			1		
(1) Mike Mazzarisi	40	1		ļ .						
Pres		1		x			1	li .	,	
(2) Sherry Mazzarisi	40	1	T		_		<u> </u>			
VP	10	1		x						
	<del> </del>		╁	1		-	1	<del> </del> -		<del></del>
(3)	ļ	1					Į .	}		
	<u> </u>	-	┢	<del> </del>			├	<del></del>		
(4)	ļ	1								
		ļ	ļ	<u> </u>	<u> </u>			<u> </u>		
(5)		]					}	9		
	1	1	1	}		<u> </u>		<u> </u>		
(6)	1							2	_	
		1	l	1					<u> </u>	
(7)		<del>                                     </del>								
		1	Į.	1			1			
(9)	<del> </del>	<del> </del>	+	$\vdash$	$\vdash$		$\vdash$			
(8)	+	┨	1	1	i	ľ				ļ
	<del> </del>	<b>├</b>	╄	╁╾	-	-	┼┈	<del> </del>	<del> </del>	<u> </u>
(9)		4	}	}	1	ļ		1		
		ļ	<del> </del> _	<b>↓</b>	ـــــ		┞	<u> </u>		
(10)		_		ĺ	1	Į .	'		1	
	<u> [</u>	<u> </u>			L	<u> </u>	<u> </u>			
(11)			ľ	i	Į.		1			
					1					1
(12)			Τ				Ī			
	<del>                                     </del>	1					]			]
/12\	<del>                                     </del>	†	+	+	-	1	╁	<del>                                     </del>		
(13)	<del>                                     </del>	┨			1		1	1		1
	<del> </del>	<del>-</del>	╀	<del> </del> —	+	<del> </del> -	+	13		
(14)	<del> </del>	4						1		
	1	1	1	1	1	1	1	I.	ı	1

Section A. Officers, Directors, Tru	stees, Key	/ Em	ploy			ind H	igh	est Compensate	d Employ	ees (c	ontinued)	<del>-</del>
(A) Name and title	(B) Average hours per week	box,	unles	Pos heck ss pe d a d	rson	e than o is both or/trust	an ee)	(D)  Reportable compensation from the	(E) Reportable compensation from related		Estimate of o	F) d amount other ensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	group organization (W-2/1099-MISC)	organizat (W-2/1099-	ions	fron organiza	n the ation and ganizations
(15)					_					7		
(16)			- \				~47	7cm . ,	*** .****		· ·	, , -
(17)	<del></del>	<u> </u>	_	<del> </del>				<u>;</u>				
					_							
(18)	<u> </u>	1										
(19)										1		
(20)						-		<u></u>			<u> </u>	
(21)			<u> </u>	<u> </u>	-		┝	[·				
		<u> </u>	_	_			ļ					_
(22)	<u> </u>									-		
(23)												
(24)					-				· · · · · · · · · · · · · · · · · · ·			<u>'</u>
(25)					-		-	<u> </u>		-		
		1			L			<u> </u>	<del>-</del>			
to Subtotal	Section A.				· ·		<b>*</b> * *					
Total number of individuals (including but n reportable compensation from the organization)	ot limited t								han \$100,0	000 of		
3 Did the organization list any former of	-					•	-	y · _	-		3	Yes No
<ul> <li>employee on line 1a? If "Yes," complete Sche</li> <li>For any individual listed on line 1a, is the organization and related organizations g</li> </ul>	sum of re	porta n \$1	ble 50,	cor 000	mpe	ensatio If "Ye	on a es, "	and other comper complete Sched	nsation from	n the		
<ul> <li>individual</li></ul>	r accrue c	ompe	nsa	tion	fro	m an	y u	nrelated organizat			5	_ <u> </u>
Section B. Independent Contractors			-					Al			0404	
<ol> <li>Complete this table for your five high compensation from the organization, Report</li> </ol>	est compe t compens	ensate ation	ea for	the	epe ca	ndent lenda:	cc r ye	ar ending with or	within the	ore the	ization's	tax year.
(A) Name and business add	ress							(B) Description of se	rvices		(C) Compensat	ion
						-	+					<del> </del>
								<del></del>				
							+					<del></del>
2 Total number of independent contractor received more than \$100,000 of compensate							to	those listed abo	ove) who	<del> </del>		

7 30 Mg

JSA 9E1051 2.000

Form 990 (2019)

	ASU (2					Page 3
Raf	t VIII	<del>-</del>	Ţ,			<del></del>
	_	Check if Schedule O contains a response or note to an				· · · · · · · · · · · · · · · · · · ·
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Srants tounts	1a b	Federated campaigns 1a  Membership dues 1b				Sections 512-514
Gifts, (ilar An	c d	Fundraising events 1c  Related organizations 1d	क <i>जात</i>			
Contributions, Gifts, Grants and Other Similar Amounts	e f	All other contributions, gifts, grants, and similar amounts not included above . 1f 10,870,659.00	*			
Contrib and Oth	g	Noncash contributions included in lines 1a-1f 1g \$				
<del>-  </del>	n_	Total, Add lines 1a-1f	10,870,659.00	<del></del>		<del></del>
		Business Code	<u></u>			<del> </del>
Program Service Revenue	2a			<del> </del>		<del></del>
ine Se	b		<u> </u>			<del> </del>
E 5	С					<b>-</b>
è a	ď					
5	е					
بة	f	All other program service revenue				
	g	Total, Add lines 2a-2f				
	3	Investment income (including dividends, interest, and				
		other similar amounts)	159,345.00			<u> </u>
1	4	Income from investment of tax-exempt bond proceeds .				
	.5	Royalties	<u>ئ</u>			
		(i) Real (ii) Personal				
_	6a	Gross rents 6a			'	`
	ь	Less: rental expenses 6b			}	1
	С	Rental income or (loss) 6c				
	q	Net rental income or (loss) ▶				
	7a	Gross amount from (i) Securities (ii) Other	****		<u> </u>	
	'-	sales of assets	d d			
		other than inventory 7a	Ġ			
au	ь	Less' cost or other basis	بت بت			
enne		and sales expenses 7b				
ķ	١ ـ	Gain or (loss) 7c				1
ď	ď	Net gain or (loss)			<del></del>	
Other Rev	ľ				<del> </del>	
ᅙ	8a	ÿ <sub>1</sub> 1				
	l	events (not including \$				
	[	of contributions reported on line	ry ·			
		1c). See Part IV, line 18 8a	Ř		1	
	Ь	Less: direct expenses 8b	- FF		<del>  -</del>	<del> </del>
	C	Net income or (loss) from fundraising events ▶		<del> </del>		<del></del>
	9a	Gross income from gaming activities. See Part IV, line 19 9a				
	b	Less: direct expenses 9b	<del></del>		<del>                                     </del>	<del></del>
	C	Net income or (loss) from gaming activities		<del> </del>	<del></del>	
	10a	Gross sales of inventory, less returns and allowances	61			
	ь	Less: cost of goods sold	<u> </u>	}		
	C	Net income or (loss) from sales of inventory.	12 N	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
<del></del>	Ť	Business Code				
sno (		<del> </del>				<del> </del>
ne Jue	11a			<del> </del>	<del> </del>	+
Miscellaneous Revenue	Ь		<del> </del>	<del> </del>	<del>                                     </del>	<del> </del>
Se.	1			<del></del>	-	<del> </del>
ž		All other revenue		<del> </del>		
	<u>e</u>	Total. Add lines 11a-11d	11 020 004 00	<del> </del>	<del> </del>	<del></del>

	Statement of Functional Expenses				
Sec	tion 501(c)(3) and 501(c)(4) organizations mus				
	Check if Schedule O contains a resp	onse or note to any lin	e in this Part XX	<u>.</u>	<u></u>
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21			<del></del>	
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign		f* 3		
	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16		Ş.		
A	Benefits paid to or for members	<del></del> -		<del>-</del>	
	Compensation of current officers, directors,				
,	trustees, and key employees		3		
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	91,898.00	91,898.00		
7	Other salaries and wages	658,367.00	658, 367.00		
8	Pension plan accruals and contributions (include		ίν <b>¿</b> '		
	section 401(k) and 403(b) employer contributions)				<u> </u>
9	Other employee benefits	1,070.00	1,070.00		
10	Payroli taxes				
	Fees for services (nonemployees):	56 006 00			
	Management	56,206.00 119.00	56,206.00 119.00	<del></del>	
	Legal	119.00		<del></del>	
	Accounting		UI (II		
	Professional fundraising services. See Part IV, line 17.		<u>ii</u>	<del></del>	
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	49,105.00	49,105.00	<del></del>	
13	Office expenses	15,621.00	15,621.00		
	Information technology	15,209.00	15,209.00		
	Royalties			<del></del>	
	Occupancy	112,202.00	112, <del>2</del> 02.00		-1 St S
	Travel			<del></del>	
18	Payments of travel or entertainment expenses	26 456 00	26 456 00		
40	for any federal, state, or local public officials	26,456.00 41,231.00	26,456.00 41,231.00	<del></del>	
	Conferences, conventions, and meetings	41,231.00	41,231.00	<del></del>	
21	Interest			<del></del>	
22	Depreciation, depletion, and amortization			<del></del>	
	Insurance	67,104.00	67,104.00		
24			Ĭ.		
	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.)				
а	Group airfare	1,440,153.00	1,440,153.00		
	Payment to travel vendors	6,834,171.00	6,834,171.00		
	Brochures	18,706.00	18,706.00		
	Festival fees & trophies	172,769.00	172,769.00		
	All other expenses	194,726.00	194,726.00		
	Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the	9,795,113.00	9,795,113.00	·	
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)				
		i l	1		<u> </u>

**Balance Sheet** Part X Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 1,440,574 2,675,465 Cash-non-interest-bearing 2 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 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) 7 Notes and loans receivable, net Inventories for sale or use 8 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other 1,414,126 basis. Complete Part VI of Schedule D 10a 164,191 1,249,935 1,249,935 10b b Less accumulated depreciation 11 11 Investments—publicly traded securities 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 2,690,509 3,925,400 Total assets. Add lines 1 through 15 (must equal line 33) 16 16 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to any current or former officer, director, Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 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 Ō Total liabilities. Add lines 17 through 25 26 Organizations that follow FASB ASC 958, check here ▶ X Balances and complete lines 27, 28, 32, and 33. 2,690,509 3,925,400 27 Net assets without donor restrictions 27 28 Net assets with donor restrictions 28 Fund Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. ò 29 Capital stock or trust principal, or current funds 29 Net Assets Paid-in or capital surplus, or land, building, or equipment fund 30 31 Retained earnings, endowment, accumulated income, or other funds 31 2,690,509 3,925,400 32 Total net assets or fund balances 32 2,690,509 3,925,400 Total liabilities and net assets/fund balances

Form 990 (2019)

Form	990 (2019) Performing Arts Consultants Inc 22-2523052		Page 12
Pa	rt XI Reconciliation of Net Assets		
	Check if Schedule O contains a response or note to any line in this Part XI		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	11,030,004
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,795,113
3	Revenue less expenses. Subtract line 2 from line 1	3	1,234,891
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,690,509
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line		
	32, column (B))	10	3,925,400
Pa	rt XII 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: X Cash Accrual Other		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		
_	Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		
	reviewed on a separate basis, consolidated basis, or both.  Separate basis Consolidated basis Both consolidated and separate basis		
h	Separate basis Consolidated basis Both consolidated and separate basis  Were the organization's financial statements audited by an independent accountant?		2b X
b	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		20 22
	separate basis, consolidated basis, or both:		
	Separate basis Consolidated basis Both consolidated and separate basis		
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of		
·	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c
	If the organization changed either its oversight process or selection process during the tax year, explain on		
	Schedule O.		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the		
	Single Audit Act and OMB Circular A-133?		3a
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b
			Form <b>990</b> (2019

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

**Public Charity Status and Public Support** 

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

Attach to Form 990 or Form 990-EZ.

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

Department of the Treasury Internal Revenue Service

Employer identification symbo

Nam	e or u	he organization					Employer identifi	cation number
Pe	rfo	rming Arts Consult	ants, Inc.					
Pa	711	Reason for Public Cha	rity Status (All o	rganizations must c	omplete	this pa	rt.) See instructions	
The	org	anization is not a private four	ndation because it	is: (For lines 1 through	h 12, ch	eck only	one box.)	
1		A church, convention of chu		· ·		-	·	$\sim 0$
2		A school described in secti	•					$\Gamma \cap I$
3		A hospital or a cooperative		•	-		• •	$\bigcup I$
4		A medical research organiz	<del>-</del>	_				(iii). Enter the
	ш.	hospital's name, city, and st	·	50.1juuuu	بن المارات			(). 2
5		An organization operated t		a college or universit	v owner	or one	rated by a governme	ntal unit described in
-		section 170(b)(1)(A)(iv). (C			,		and by a government	
6		A federal, state, or local go	•	nmental unit describe	d in sect	ion 170(	h)(1)(Δ)(v).	
7		An organization that norma	_			-		om the general public
		described in section 170(b)	-	•	<b>PP-11</b>	<b></b> go		m the general public
8		A community trust describe			Part II )			
9		An agricultural research org	-		- 1	perated	in conjunction with a	land grant college
	L	or university or a non-land-						
		university:	g. a yoogo o. ag		,			tille college ci
10	$\mathbf{x}$	, · <del></del>	lly receives: (1) mo	ore than 331/3 % of its	support	from co	ntributions, membersh	nip fees, and gross
-		receipts from activities rela	ted to its exempt for	unctions - subject to o	certain e	xception:	s, and (2) no more that	n 331/3% of its
		support from gross investme acquired by the organization	ent income and ur	nrelated business tax	able inco	me (less	s section 511 tax) from	businesses
11	$\Gamma$	An organization organized						
12	$\vdash$	An organization organized	•	•	=			arry out the purposes
_		of one or more publicly su	•	•				• • •
		Check the box in lines 12a t						
а	Γ	Type I. A supporting orga	-		ч			
-	_	the supported organization	•	•	-		•	
		supporting organization.	• •	• • • •		2,0.11, 0.	the directors of traste	
b	Γ	Type II. A supporting org	•			with its	supported organization	on(s) by having
-	ـــ	control or management of						
		organization(s). You must			2	о <b>р</b> олоон		
С		Type III functionally inter			ted in co	onnection	n with and functional	ly integrated with
Ī	_	its supported organization						,
d	۲	Type III non-functionally			1.3			ted organization(s)
-	_	that is not functionally inte						
		requirement (see instruct	-					
е	۲	Check this box if the orga	•	-				I, Type III
	_	functionally integrated, or						
f	En	nter the number of supported						
g		ovide the following information						
		lame of supported organization	(li) EIN	(iii) Type of organization		prganizalion	(v) Amount of monetary	(vi) Amount of
				(described on lines 1-10 above (see instructions))	listed in you	ur governing ment?	support (see instructions)	other support (see instructions)
				above (see instructions))	Yes	No		
/A\								
(A)								
(B)								\
(B)								
(C)								\
<del>(</del>					<b> </b>			
(D)					,			
<del>,</del>					<u> </u>			
(E)								
<del></del>					<del> </del> ,			
Tot	al							
- •			i	1				

Fair	(Complete only if you checked Part III. If the organization fail	d the box on I	ine 5, 7, or 8	of Part I or if th	ne organizatio	on failed to qu	
Seci	tion A. Public Support				<del></del>		
Cale	ndar 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				· · · · · · · · · · · · · · · · · · ·		ļ
3	The value of services or facilities furnished by a governmental unit to the organization without charge			12 .3.CH			
4	Total. Add lines 1 through 3					4	<del> </del>
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						
6	shown on line 11, column (f)			0		<del>                                     </del>	<del> </del>
	tion B. Total Support		<u> </u>	3	/	<u> </u>	<u> </u>
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4	(-)	(5) 25 (5)	(37=3,7)	<u> </u>	19,000	:
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from						er etc.
1	similar sources	·	<u>'</u>			<del> </del>	<del>  ``</del>
9	Net income from unrelated business activities, whether or not the business is regularly carried on			, p			
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)			\s\			
11	Total support Add lines 7 through 10						
12	Gross receipts from related activities, etc. (s	ee instructions) .	/			12	
13	First five years. If the Form 990 is forganization, check this box and stop here.	<u>/</u>					
Sec	tion C. Computation of Public Supp		<del></del>	ĝi Ol		<del></del>	
14	Public support percentage for 2019 (lie						%
15	Public support percentage from 2018						<u>%</u>
16a	331/3% support test - 2019. If the org box and stop here. The organization qu						
h	331/3% support test - 2018. If the org						
D	this box and stop here. The organization						
172	10%-facts-and-circumstances test - 2						
	10% or more, and if the organization						
	Part VI how the organization meets t						
	organization			Ū			▶ 🔲
b	10%-facts-and-circumstances test - 2	018. If the or	ganization did r	not check a box	on line 13, 16	6a, 16b, or 17a	
	15 is 10% or more, and if the orga	inization meets	s the "facts-an	d-circumstances	test, check	this box and s	top here.
	Explain in Part VI how the organization	on meets the '	facts-and-circu	mstances" test.	The organizati	on qualifies as	a publicly
	supported organization						▶ 📖
18	Private foundation. If the organization						<b>►</b>
	instructions ./			11			990 or 990-EZ) 2019
				ř. Ši	•		

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

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

...

<u>sec</u>	tion A. Public Support						
Caler	ndar 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			#. S2			
	received. (Do not include any "unusual grants.")			rz			
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 .	8,813,235.00	9,302,859.00	9,963,355.00	10,323,746.00	0,870,659.00	49,273,854.00
4	Tax revenues levied for the			1			
	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	Total. Add lines 1 through 5	8,813,235.00	9,302,859.00	9,963,355.00	10,323,746.00	10,870,659.00	49,273,854.00
7 a	Amounts included on lines 1, 2, and 3			t.			
	received from disqualified persons			μ			
b	Amounts included on lines 2 and 3			ت ا ا			
	received from other than disqualified persons that exceed the greater of \$5,000			i, ii			
	or 1% of the amount on line 13 for the year	_		ı			
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						49,273,854.00
Sec.	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6	8,813,235.00	9,302,859.00	9,963,355.00	0,323,746.00	10,870,659.00	49,273,854.00
10 a	Gross income from interest, dividends,			Ř			
	payments received on securities loans, rents, royalties, and income from similar						
	sources			15,009.00	7,217.00	159,345.00	181,571.00
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses				·		
	acquired after June 30, 1975						
C	Add lines 10a and 10b			15,009.00	7,217.00	159,345.00	181,571.00
11	Net income from unrelated business			Ð			
	activities not included in line 10b, whether			S S			
	or not the business is regularly carried on			13			
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.)	8,813,235.00	9,302,859.00	9,978,364.00	0,330,963.00	1,030,004.00	49,455,425.00
14	First five years. If the Form 990 is i	for the organiza	tion's first, seco	nd, third, fourth	, or fifth tax ye	ear as a section	501(c)(3)
	organization, check this box and stop here	<u></u>	<u></u>	· · · · · · · · · · · · · · · · · · ·	<u> </u>	<u> </u>	▶
Sec	tion C. Computation of Public Sup	port Percenta	ge		·		
15	Public support percentage for 2019 (line 8	, column (f), divid	ed by line 13, colu	mn (f))		15	99.6329 %
16	Public support percentage from 2018 Scho	edule A, Part III, lir	ne 15	<u></u>		16	<u></u> %
Sec	tion D. Computation of Investmen	it Income Perd	entage				
17	Investment income percentage for 2019 (li	ine 10c, calumn (	f), divided by line	13, column (f))		17	0.3671 %
18	Investment income percentage from 2018					18	%%_
	331/3% support tests - 2019. If the o					ore than 331/3 %	, and line
	17. is not more than 331/3%, check-th	is box and stor	o here. The ora	anization qualifie	s as a publicly	supported organi	zation . ▶
h	331/3% support tests - 2018. If the org	anization did not	check a box on	line 14 or line	19a, and line 16	is more than 33	1/3 %, and
5	line 18 is not more than 331/3 %, check	this box and s	top here. The or	ganization <sup>(</sup> /qualifi	es as a publicly	supported organi	zation 🕨 🔲
20	Private foundation. If the organization	did not check a	box on line 1	4, 19a, or 19b.	check this box	and see instruc	ctions >
150	The state of the s			<u></u>	S	chedule A (Form 9	90 or 990-EZ) 2019

#### 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.)

Section A. A	411	Supporting	Organizations
--------------	-----	------------	---------------

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3 a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a_		
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.	3b		
С	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.	3с		
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.	4a		
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.	4b		 
С	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.	4c		
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).	5a		
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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	<u> </u>	
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.	6		
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).	7		 
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a control in interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	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.	9c		
0 a	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.	10a		
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.)	10b		

(į

	le A (Form 990 or 990-EZ) 2019			Page 5
Part	V 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)			
	below, the governing body of a supported organization?	11a		<u> </u>
	A family member of a person described in (a) above?	11b	<u> </u>	
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	L.,	L
Secti	on B. Type I Supporting Organizations			
	$rac{\epsilon}{2}$		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 of trustees at all times during the 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, 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		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
<u>Secti</u>	on C. Type II Supporting Organizations	_		
	. $arphi$	لـــــ	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 or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	ភ 1.	ť	
Secti	on D. All Type III Supporting Organizations		۲,	, 11
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	, "t	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how 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 significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1 a b	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instant The organization satisfied the Activities Test. Complete line 2 below.  The organization is the parent of each of its supported organizations. Complete line 3 below.  The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see		ctions).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	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 those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b_		
3 a	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	36		

r

ij

Part V. Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	iza	tio	ns	
1 Check here if the organization satisfied the Integral Part Test as a qualifying				in in Part VI). See
instructions. All other Type III non-functionally integrated supporting organization				
Section A - Adjusted Net Income			(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	T	1		(
2 Recoveries of prior-year distributions	1	2		··· · · · · · · · · · · · · · · · · ·
3 Other gross income (see instructions)	$\overline{}$	3	<del></del>	
4 Add lines 1 through 3.		4		
5 Depreciation and depletion	T	5	·	
6 Portion of operating expenses paid or incurred for production or	十	7		
collection of gross income or for management, conservation, or		- 1		
maintenance of property held for production of income (see instructions)	-	6		
7 Other expenses (see instructions)	1	7	<u> </u>	*
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	$\top$	8		
Section B - Minimum Asset Amount			(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see	Т			
instructions for short tax year or assets held for part of year):				
a Average monthly value of securities	1	ia		
b Average monthly cash balances	1	b		
c Fair market value of other non-exempt-use assets	•	lc		
d Total (add lines 1a, 1b, and 1c)	1	d		
e Discount claimed for blockage or other				
factors (explain in detail in Part VI):				
2 Acquisition indebtedness applicable to non-exempt-use assets	:	2		
3 Subtract line 2 from line 1d.	T	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, "	7			
see instructions).		4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	$\neg$	5		
6 Multiply line 5 by .035.	П	6		
7 Recoveries of prior-year distributions	$\neg$	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)	$\Box$	1		
2 Enter 85% of line 1.	$\Box T$	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)		3		
4 Enter greater of line 2 or line 3.		4		
5 Income tax imposed in prior year		5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to	T	$\neg$		
emergency temporary reduction (see instructions).		6		
7 Check here if the current year is the organization's first as a non-functionally instructions).	y in	teg	rated Type III supporting	organization (see
4,			Schedule A	(Form 990 or 990-EZ) 2019
Ž.				

Part	Type III Non-Functionally Integrated 509(a)(3) \$	Supporting Organizat	ions (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish ex	cempt purposes	**************************************	
2	Amounts paid to perform activity that directly furthers exen		ed	
	organizations, in excess of income from activity	9		
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organiz	ations	<del></del>
4	Amounts paid to acquire exempt-use assets			·
5	Qualified set-aside amounts (prior IRS approval required)	· · · · · · · · · · · · · · · · · · ·		
6	Other distributions (describe in Part VI). See instructions.	-, <del></del>		······································
7	Total annual distributions. Add lines 1 through 6.			<del></del>
8	Distributions to attentive supported organizations to which	the organization is resp	onsive	·
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6		****	······································
10	Line 8 amount divided by line 9 amount	- 1		· · · · · · · · · · · · · · · · · · ·
			(ii)	(iii)
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2019	Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019			
	(reasonable cause required - explain in Part VI). See			
	instructions.	Ći		<del></del>
3	Excess distributions carryover, if any, to 2019	8		
a	From 2014			
b	From 2015		<u>:, ,</u>	
С	From 2016			
d	From 2017		<u> </u>	
e	From 2018		1 1	
f	Total of lines 3a through e			- <del></del>
g	Applied to underdistributions of prior years		· \	
h	Applied to 2019 distributable amount	- 2		
i	Carryover from 2014 not applied (see instructions)	Ä		· · · · · · · · · · · · · · · · · · ·
<u>i</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			·
4	Distributions for 2019 from	٠ .		
	Section D, line 7: \$	1		
a	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
С	Remainder, Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if	o .		
	any. Subtract lines 3g and 4a from line 2. For result	ģ		
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h	[	1	
	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	è		
b	Excess from 2016	Ĭį.		
С	Excess from 2017			
d	Excess from 2018			
	Evenes from 2019	1		

Schedule A (Form 990 or 990-EZ) 2019



	•		·/	
Schedule A'(	III, line 12; Part IV, Section AB, lines 1 and 2; Part IV, Sec 3a, and 3b; Part V, line 1; Pa	Provide the explanations request, lines 1, 2, 3b, 3c, 4b, 4c, 5 ction C, line 1; Part IV, Section B, line 1e; Part Volete this part for any additional	a, 6, 9à, 9b, 9c, 11a, 11b, a D, lines 2 and 3; Part IV, Se , Section D, lines 5, 6, and 8	nd 11c; Part IV, Section ection E, lines 1c, 2a, 2b, 3; and Part V, Section E,
			:	
			9 8	
			Actions 1999	
			;,	
			31	
				· · · · · · · · · · · · · · · · · · ·
· , ,	and the second	د د د د د د وساده کارد سا	٠ مؤد	
<del> </del>			ਮ ਮ	
				, a
			,	-
	***		u K	
		<u> </u>		
<del></del> -				
			ा ए र्स	
			12	
			<b>,</b>	100
<u> </u>			ę,	
			<u></u>	
		<del></del>		
<del></del> -				
			U	
			Sc.	hedule A (Form 990 or 990-F7) 2019

### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Financial Statements
► Complete if the organization answered "Yes" on Form 990,

....

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

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

OMB No. 1545-0047

Employer identification number

	forming Arts Consultants, Inc. Organizations Maintaining Donor Advis			or Accounts.
—	Complete if the organization answered "			(h) Friedrand albanania
	· · · · · · · ·	(a) Donor adv	used funds	(b) Funds and other accounts
1	Total number at end of year	<del></del>		+
2	Aggregate value of contributions to (during year)	<del></del> -	·	<del> </del>
3	Aggregate value of grants from (during year)	<del></del>		<del> </del>
4	Aggregate value at end of year	<del></del>		
5	Did the organization inform all donors and donor	_	• •	
_	funds are the organization's property, subject to the	•		
6	Did the organization inform all grantees, donors, ar			
	only for charitable purposes and not for the benefi			
	conferring impermissible private benefit?	<u> </u>	· · · · · · · · · · · · · · · · · · ·	Yes N
	Complete if the experience on word!	'Voo" on Form 000	Dort IV line 7	
1	Complete if the organization answered "			
•	Purpose(s) of conservation easements held by the	-		
	Preservation of land for public use (for example,	recreation or education)		on of a historically important land area
	Protection of natural habitat		GPreservatio	on of a certified historic structure
2	Preservation of open space	ldalified	ration contribution	in the form of a consequition
4	Complete lines 2a through 2d if the organization hel	o a quaimeo conserv	vation contribution	Held at the End of the Tax Yea
_	easement on the last day of the tax year.		* *	<del></del>
a L	Total number of conservation easements Total acreage restricted by conservation easements			
b	Number of conservation easements on a certified h			
d	Number of conservation easements included in (c)		• •	f 1 :
u	• •	· ·		
3	historic structure listed in the National Register  Number of conservation easements modified, tran			
5	tax year >	sierieu, releaseu, ez	unguișneu, or te	minated by the organization during t
4	Number of states where property subject to conserv	vation easement is lo	rated <b>&gt;</b>	
5	Does the organization have a written policy regard			ection handling of
•	violations, and enforcement of the conservation eas			
6	Staff and volunteer hours devoted to monitoring, inspe			
•	Start and volunteer flours devoted to monitoring, inspe	cuing, hariding of vior	\$	ing conservation easements during the ye
7	Amount of expenses incurred in monitoring, inspecti	ng handling of violati	ons and enforcing	r conservation easements during the ve
•	S	ng, nanamig or violes	۸۰ د ۱۱۱۵ د ۱۱۱۵ د ۱۱۱۵	g conservation casements during the ye
8	Does each conservation easement reported on line 2	(d) above satisfy the r	equirements of se	ection 170(h)(4)(B)(i)
•	and section 170(h)(4)(B)(ii)?	• • •	*	
9	In Part XIII, describe how the organization reports of	onservation easeme	ents in its revenue	and expense statement and
•	balance sheet, and include, if applicable, the text of			
	organization's accounting for conservation easemen		J	
Pa	Organizations Maintaining Collections Complete if the organization answered			her Similar Assets.
1a	If the organization elected, as permitted under FAS of art, historical treasures, or other similar assets service, provide in Part XIII the text of the footnote to	SB ASC 958, not to sheld for public exo its financial statem	report' in its reve chibition, education ents that describe	nue statement and balance sheet worn, or research in furtherance of put s these items.
b	If the organization elected, as permitted under FA art, historical treasures, or other similar assets held provide the following amounts relating to these item	d for public exhibitio is:	n, education, or r	esearch in furtherance of public servi
	(i) Revenue included on Form 990, Part VIII, line 1.			▶\$
	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art	, historical treasure:	s, or other simila	ar assets for financial gain, provide t
	following amounts required to be reported under FA			
а	Revenue included on Form 990, Part VIII, line 1			▶\$
h				<b>▶</b> \$

Pa	ntill Organizations Maintaini	ng Colle	ctions of	Art, Histo	rical Tre	asures,	or Other	Similar A	ssets (	continue	ed)
3	Using the organization's acquisition	n, acces	sion, and o	other recor	ds, check	any of t	he follov	ving that n	nake sig	nificant u	use of its
	collection items (check all that app	ly):									
а	Public exhibition			d	Loan c	or exchang	je progra	m			
b	Scholarly research			e	Other						
C	Preservation for future gene	rations								-	
4	Provide a description of the organ	nization's	collections	and expla	in how t	hey, furth	er the or	ganization'	s exemp	t purpos	e in Part
	XIII.					9) 9:					
5	During the year, did the organization	n solicit d	or receive o	donations o	f art, histo	orical trea	sures, or	other simil	ar		
	assets to be sold to raise funds rath	ner than to	o be mainta	ained as pa	rt of the c	organizatio	on's colle	ction?	. , , . [	Yes	No
Pa	RIV Escrow and Custodial A	rrangem	nents.								
	Complete if the organiza	ation ans	wered "Ye	es" on For	n 990, P	art IV, lir	e 9, or r	eported a	n amou	nt on Fo	rm
	990, Part X, line 21.										
1 a	Is the organization an agent, truste	e, custo	dian or other	er intermed	iary for c	ontribution	ns or othe	r assets no	t		
	included on Form 990, Part X?							. <b></b> .	[	Yes	No
b	If "Yes," explain the arrangement i	n Part XII	I and comp	olete the fol	lowing tab	ole: 👳 🔃					
						8			Amount		
C	Beginning balance					1	c				
d	Additions during the year					1	d				
e	Distributions during the year					<u>1</u>	e	,			
f	Ending balance							<u> </u>			
2a	Did the organization include an am	ount on F	Form 990,	Part X, line	21, for e	scrow or	custodial	account lia	bility?	Yes	No
	If "Yes," explain the arrangement i	n Part XII	I. Check he	ere if the ex	φlanation	has been	provided	on Part XIII		· · · · ·	
Pa	tV Endowment Funds.					U <sup>1</sup>					
	Complete if the organiza	tion ans	wered "Ye	es" on For	m 990, F	Part IV, lir	e 10.	<u> </u>			
	. 41	(a) Cur	rent year	(b) Prio	r year	(c) Two y	ars back	(d) Three y	ears back	(e) Four	years back
1a	Beginning of year balance							<u> </u>			
b	Contributions										
¢	Net investment earnings, gains,		•				•	<b>\</b> - ,		·	
	and losses						~	<u> </u>	<del></del>		
q	Grants or scholarships							<u></u>			
е	Other expenditures for facilities					ស					
	and programs							<u> </u>			
f	Administrative expenses				_	N					
g	End of year balance					L		<u> </u>			
2	Provide the estimated percentage	of the cu	rrent year	end balance	e (line 1g,	column (a	)) held as	<b>S</b> :			
a	Board designated or quasi-endown	_		_%							
b	Permanent endowment ▶	%									
C	Term endowment ▶	_%									
	The percentages on lines 2a, 2b, a										
3a	Are there endowment funds not in	the posse	ession of th	ne organiza	ition that	are held a	ind admi	nistered for	the	<u></u>	<u> </u>
	organization by:					ĬĬ					res No
	(i) Unrelated organizations									3a(i)	
	(ii) Related organizations									3a(ii)	
b	If "Yes" on line 3a(ii), are the relate						• • • •	• • • • • •		3b	
4	Describe in Part XIII the intended			tion's endo	wment fur	nds.					
/Pa	Land, Buildings, and Equality Complete if the organiz	uipment. ation ans	swered "Y	es" on Foi	m 990 I	Part IV li	ne 11a	See Form	990 Pa	art X line	e 10.
	Description of property	adon an		r other basis	(b) Cost	or other basis	(c) Ac	cumulated		) Book val	
<u> </u>				tment)	(0	ther)	dep	reciation			
1 a	Land					- <u>{ [ i</u>					
b	Buildings					<u> </u>	<del> </del>			<del></del>	
С	Leasehold improvements					1000	+	101 11		0.4.0	005 00
ď	Equipment				1,414	,126.00	164,	191.00	1	.,249,	935.00
<u>е</u>	Other	• • • • •	<u></u> _		V	- (D) (i'	10-1			040	005 00
Tota	I. Add lines 1a through 1e. (Column	ı (d) musi	t equal Fori	<u>n 990, Part</u>	x, columi	n (B), line	1UC.)	<u> ▶</u>	1	.,249,	935.00

67.75

(a) Description of security or category	(b) Book value	(c) M	ethod of valuation:
(including name of security)		Cost or e	nd-of-year market value
) Financial derivatives		<del> </del>	
Closely held equity interests	•	<del>                                     </del>	
Other	<del></del> -	<del> </del>	
(A)		· .	
(B)			<del></del>
(C) (D)	<del>- }</del>	300	<del></del>
(E)	<del></del>		
(F)		<u> </u>	
(G)		<del></del>	
(H)		<del> </del>	
tal. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		<del>  `</del>	
art VIII Investments - Program Related.	<u></u>	<u> </u>	
Complete if the organization answer	ed "Yes" on Form 99	0. Part IV. line 11c. Se	e Form 990 Part X line 13
(a) Description of investment	(b) Book value	7	ethod of valuation:
(a) Description of investment	(b) book value		nd-of-year market value
1)			<del></del>
2)			,
3)	<del>-</del>	<del></del>	
4)			***
5)	<del></del>		
5)		6	. , ,
7)		ή, γ'	
3)		19	
9)			
tal. (Column (b) must equal Form 990, Part X, col. (8) line 13 ) .	>	1	
art IX Other Assets.			
Complete if the organization answer	ed "Yes" on Form 99 Description	0, Part IV, line 11d. Se	ee Form 990, Part X, line 15.
Complete if the organization answer (a)		0, Part IV, line 11d. Se	<del></del>
Complete if the organization answer (a) 1)			<del></del>
Complete if the organization answer  (a)  1)  2)  3)		0, Part IV, line 11d. Se	<del></del>
Complete if the organization answer (a)  1) 2) 3) 4)			<del></del>
Complete if the organization answer  (a)  1)  2)  3)  4)		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	<del></del>
Complete if the organization answer  (a)  1)  2)  3)  4)  5)		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	<del></del>
Complete if the organization answer (a) 1) 2) 3) 4) 5) 6) 7)		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	<del></del>
Complete if the organization answer  (a)  1)  2)  3)  4)  5)  6)  7)		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	<del></del>
Complete if the organization answer  (a)  1)  2)  3)  4)  5)  6)  7)  8)  9)	Description	7. 62.	<del></del>
Complete if the organization answer  (a)  1)  2)  3)  4)  5)  6)  7)  8)  9)  otal. (Column (b) must equal Form 990, Part X, col. (b)	Description	7. 62.	
Complete if the organization answer  (a)  1)  2)  3)  4)  5)  6)  7)  8)  9)  otal. (Column (b) must equal Form 990, Part X, col. (b)	Description  B) line 15.)	ř.	(b) Book value
Complete if the organization answer  (a)  1)  2)  3)  4)  5)  6)  7)  8)  9)  Otal. (Column (b) must equal Form 990, Part X, col. (E)  Complete if the organization answer line 25.	Description  B) line 15.)	ř.	(b) Book value
Complete if the organization answer  (a)  1)  2)  3)  4)  5)  6)  7)  8)  9)  Otal. (Column (b) must equal Form 990, Part X, col. (E)  Complete if the organization answer line 25.	B) line 15.)	ř.	(b) Book value
Complete if the organization answer  (a)  1)  2)  3)  4)  5)  6)  7)  8)  9)  otal. (Column (b) must equal Form 990, Part X, col. (E)  art X Other Liabilities.  Complete if the organization answer line 25.  (a) Desc	B) line 15.)	ř.	(b) Book value
Complete if the organization answer  (a)  (a)  (b)  (c)  (d)  (e)  (e)  (e)  (e)  (e)  (e)  (f)  (f	B) line 15.)	ř.	(b) Book value
Complete if the organization answer  (a)  (a)  (b)  (c)  (d)  (e)  (e)  (e)  (e)  (f)  (e)  (f)  (f	B) line 15.)	ř.	(b) Book value
Complete if the organization answer  (a)  (a)  (b)  (c)  (d)  (e)  (e)  (e)  (e)  (e)  (e)  (f)  (e)  (f)  (e)  (e	B) line 15.)	ř.	(b) Book value
Complete if the organization answer  (a)  (a)  (b)  (c)  (d)  (e)  (e)  (e)  (e)  (f)  (e)  (f)  (f	B) line 15.)	ř.	(b) Book value
Complete if the organization answer  (a)  (a)  (b)  (c)  (d)  (e)  (e)  (e)  (e)  (e)  (e)  (f)  (e)  (f)  (e)  (e	B) line 15.)	ř.	(b) Book value
Complete if the organization answer  (a)  1)  2)  3)  4)  5)  6)  7)  8)  9)  Otal. (Column (b) must equal Form 990, Part X, col. (Example 25)  Complete if the organization answer line 25.  (a) Description (a) Description (b) (b) Description (c) (c) (c) (c) (c) (c) (c) (c) (c) (c)	B) line 15.)	ř.	(b) Book value
Complete if the organization answer  (a)  1)  2)  3)  4)  5)  6)  7)  8)  9)  otal. (Column (b) must equal Form 990, Part X, col. (E)  art X Other Liabilities.  Complete if the organization answer line 25.  (a) Desc  1) Federal income taxes  2)  3)  4)  5)  6)  7)	B) line 15.)	ř.	(b) Book value
Complete if the organization answer  (a)  1)  2)  3)  4)  5)  6)  7)  8)  9)  otal. (Column (b) must equal Form 990, Part X, col. (E)  art X Other Liabilities.  Complete if the organization answer line 25.  (a) Desc  1) Federal income taxes  2)  3)  4)  5)  6)  77  8)	Description  B) line 15.)	0, Part IV, line 11e or	(b) Book value

	e D (Form 990) 2019		Page 4
Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Retur Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities	]	
С	Recoveries of prior year grants	]	
d	Other (Describe in Part XIII.)	1	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990 Part VIII line 12 but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)	]	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
<b>Part</b>		ırn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	1 1	
b	Prior year adjustments	1	
c	Other losses		
q.		1	
	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a			`
b	Other (Describe in Part XIII.)	1	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
Part	Supplemental Information.		
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; F		4; Part X, line
2; Par	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inforn	nation.	
	্ব		
•	13		
	Q		
_	ヌゼ		
_			
	0		
		-	

ų,

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

# Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2019

Open to Rublic Linspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Performing Arts Consultants, Inc.						
Form 990 VI Line 11B Orga	nizations process to	review the 990,	No review was or will			
be conducted. Form 990 VI	Line 19 Governing	documents disclo	sure explanations are			
available at company office	. Form 990 Page 10	Line 24 E All of	ther expenses:			
BSC	33,856.00					
Postage	64,548.00					
Equip Rental	33,277.00					
Payroll Exp	14,915.00	ş .				
Customer Apprec	19,053.00	5	·			
Misc	29,077.00		,			
TOTAL		194,726.	00 , , ,			
			<u> </u>			
			·			
		۱۱ <u>۲</u>				
		()	1			
		ક <u>િ</u>				
		33				