(Rev January 2020)

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2019

Department of the Treasury Internal Revenue Service Do not enter social security numbers on this form as it may be made public. Open to Public Inspection									Public tion	
A			dar year, or tax year beginning		, 2019, and end		Decembe	er 31	, 20 19	
В		applicable	C Name of organization Containe			9			oyer identification	number
_		* *	Doing business as	Royalty Cential Collect	on runu		-	D Ciripi	46 2758874	Hamber
H	Address	•	Number and street (or P O box i	f mail is not delivered to street	address)	Room	/suite	E Teleni	hone number	
님	Name ch	_	,	i maii is not delivered to street	addressy		e 350NA	E Telepi	(732) 404-3122	,
H	Initial ret		125 Chubb Avenue City or town, state or province, c	sounts, and 7ID or foreign post	al ando	Suit	e 350IVA		(732) 404-3122	
님		rn/terminated		country, and ZIP or foreign posi-	ai code			G Groce	receipts \$	2 245 004
님	Amende		Lyndhurst, NJ 07071 F Name and address of principal of	See Mr. Anthony Dolong		<u> </u>			or subordinates? Y	2,345,981
Ш	Applicati	on pending			es included?	_				
	Tay over	npt status			st (see instruction:					
÷	Website	·	H(c) Group exe			")				
<u></u>		organization	Corporation Trust Associa	ation ☐ Other ►	L Year of for				of legal domicile	NJ
P	art I	Summa		ation [_]OtherP	L real of for	mation	2013	W Otate	or legal dornione	
	1		cribe the organization's miss	sion or most significant	ctivities. The c	rganiz	ration was fo	rmed	to collect all	
ø	'	-	ts payable to the fund in acco							ociation
Governance			nd the United States Maritime		Dilliact Detweer	i uie ii	iterriationar	LUIIYSI	iloremen 5 A550	Juanon
Ĕ	2		box $ ightharpoonup$ if the organization		ione or dienose	ed of r	nore than 2	5% of	ite not seedte	
ĕ	3		voting members of the gove] 3		2
<u>ن</u> ھ	4		independent voting member					4		2
es			per of individuals employed in					5		2
ΥĒ	1		per of individuals employed in per of volunteers (estimate if					6		<u>3</u>
Activities &			ated business revenue from	•				7a		
_	1		ted business taxable income					7b		
	-	14Ct dill Clat	ed basiness taxable income	101111 01111 000 1, 11110	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Ť	Prior Year	1.5	Current Ye	
	8	Contributio	ons and grants (Part VIII, line	1h)						
Revenue	1		ervice revenue (Part VIII, line	·			2 6	42,240		2,310,000
Ver	10	_	t income (Part VIII, column (A	2,0	42,240					
æ			nue (Part VIII, column (A), line					0		35,981
	12		ue—add lines 8 through 11 (r				2 6			2 245 001
-	13		I similar amounts paid (Part I				2,04	42,240	·	<u>2,345,981</u>
	14		aid to or for members (Part I)			<u> </u>				
	15	-	her compensation, employee	1.0	28,939		1,048,788			
Expenses	l		al fundraising fees (Part IX, c		(1), 11103 0 10)	—	1,02	20,333		1,040,700
en	l .		aising expenses (Part IX, col			<u> </u>		-		
X	1		enses (Part IX, column (A), lin			<u> </u>	1 50	86,956		1,182,947
	18	Total expe	nses. Add lines 13–17 (must	equal Part IX column	の門が作り	\vdash		15,895		2,231,735
	19	Revenue le	ess expenses. Subtract line 1	18 from line 12	19711110 209	넿		26,345		114,246
- S		TICVCITAC IC	33 expenses. Odetract line 1		V 1 5 2020		nning of Currei		End of Ye	
ance a	20	Total accet	s (Part X, line 16)	JUI	4 1 9 COCO	RS		74,332		5,478,056
Net Assets or Fund Balances	21		ties (Part X, line 26)			┛≝		56,519		5,476,0 <u>30</u>
ë ë	22	Net assets	or fund balances. Subtract I	ine 21 from line 20	DÉN. UT	` 		17,813	37.	332,059
	irt II	Signatu	re Block	7	<u> </u>	لسلسا		17,013		332,033
			I declare that I have examined this i	return, including accompanyin	schedules and st	atemen	ts and to the b	nest of r	ny knowledge and	belief, it is
tru	e, correct	, and complete	e Declaration of preparer other than	officer) is based on all informa	ition of which prepared	arer has	any knowledg	e	,	
' —			- / K da Nilin	N/			7.	714	-2020	
Sig	n	Signatu	are of officer	1	1		Date			
He			Supply I 1)	LANOUPS HO	HEENT					
		Type or	r print name and title	1011912	110-110					
	• .1	Print/Type	preparer's name	Preparer's signature		Date		Check [T If PTIN	
Pa		1					I .	self-emp		
	epare	Constant and a	ne •				Firm's E			
US	e Onl	Firm's add				-	Phone r			
Ma	v the IR		this return with the preparer	shown above? (see insti	ructions) .			- -	. Yes	□No
	•		ion Act Notice, see the separa			t No 1	1282Y			990 (2019)

2,231,735

Total program service expenses ▶



(D50

Part	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		_
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		7
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		√
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i>	4	ν	A
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	√	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		✓
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> .	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		√
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		✓
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	✓	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		√
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		✓
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		✓
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	✓_	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	1 <u>1f</u>		✓
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parls XI and XII	12a	✓	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		√
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		√
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		√
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		√
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16_		✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	17		✓
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		✓
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b	\sim	K
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1

Part	V Checklist of Required Schedules (continued)	_		
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		✓
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	✓	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	N	H
С .	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	رام	A
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<i>y</i>	/ /
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	N	A
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	N	A
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	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) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		<i>J</i>
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):			Ť
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		-
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		<u>·</u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓_
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		✓
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35b	N	0
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36	N	A
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		✓
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	✓	
Part				
	Check if Schedule O contains a response or note to any line in this Part V	·	· ·	 No
10	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		Yes	140
1a b	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			,
J	reportable gaming (gambling) winnings to prize winners?	1c	V	X
		Forr	n 990	(2019)

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		' -	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 3			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	✓	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓_
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	Z	1
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		✓
b	If "Yes," enter the name of the foreign country ▶			1
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		✓_
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		√
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	ν	#
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
_	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	<u> </u>	./	1
_	gifts were not tax deductible?	6b	ρ	AT
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		<u>~</u> .	لبر—
	and services provided to the payor?	7a 7b	1	4/_
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?	/ D		<i>/</i> /_
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7c	./	1
a	required to file Form 8282?	- 70	p_{\perp}	-X
d e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	—	7/-	-/-
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	4/	1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	1/	1
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	1	1
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		,,,	7
Ü	sponsoring organization have excess business holdings at any time during the year?	8	W	A
9	Sponsoring organizations maintaining donor advised funds.			_
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	70°,	D
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	N	A
10	Section 501(c)(7) organizations. Enter.			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter.			
а	Gross income from members or shareholders			1
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)		,.	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	~	<u> </u>
b	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.		<u>/</u>	
а	Is the organization licensed to issue qualified health plans in more than one state?	1 <u>3a</u>		7
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			ľ
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand		, ,	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	N	4
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b	~	1
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		_ _
	If "Yes," see instructions and file Form 4720, Schedule N			<i>,</i> /
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		<i>V</i>
	If "Yes," complete Form 4720, Schedule O.			

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O Check if Schedule O contains a response or note to any line in this Part VI			
Secti	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 2		- 	
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O			
b	Enter the number of voting members included on line 1a, above, who are independent . 1b 2		l	l i
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			
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		/
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		✓
6	Did the organization have members or stockholders?	6	L	✓
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		1
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	√	
b	Each committee with authority to act on behalf of the governing body?	8b	✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		✓
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co	ode. <u>)</u>)
			Yes	
10a	Did the organization have local chapters, branches, or affiliates?	10a	<u> </u>	↓ ✓
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	كر	A
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	<u> </u>	✓
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	<u> </u>	/
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	✓	
13 14	Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?	13 14		√
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		√
b	Other officers or key employees of the organization	15b		✓ .
	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 with a taxable entity during the year?	16a		√
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	\mathcal{P}^{\prime}	A
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ None			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of and financial statements available to the public during the tax year.			olicy,
20	State the name, address, and telephone number of the person who possesses the organization's books and rec	ords	>	
	Mr. Joseph Marino c/o CCC Service Corporation, 125 Chubb Avenue, Suite 350NB, Lyndhurst, NJ 07071			

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Form	990	1201	91

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

- Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the
- organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

☐ Check this box if neither the organization noi	r any relate	d org	anız	atic	on c	ompe	ensa	ited any current	officer, director,	or trustee
	(C)									
(A)	(B)	Position						(D)	(E)	(F)
Name and title	Average		do not check more than one box, unless person is both an					Reportable	Reportable	Estimated amount
	hours per week (list any	-	er an		lirect	or/trus	<u> </u>	compensation from the	compensation from related	of other compensation
		Individual trustee or director	Inst	Officer	Ş e	emp Hig	Former	organization	organizations	from the
	hours for related	lirec	Institutional trustee	cer	Key employee	hest	aer	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
	organizations	o a	onal		Ş	မီ ဋ				Telated Organizations
	below dotted line)	-uste	ź		ê) per				
	dotted line)	ď	stee			Highest compensated employee				
(1) Charles W. Flynn	40		\vdash			_	┢			
(1) Charles W. Flynn President and Trustee	40							405,683		
(0) 0 1 1 11 0 15	40		\vdash	-		 	t	403,063		
(2) Paul J. McCarrny Executive Vice President	70	1						291,131		
(3) Eileen Flannelly Mackell	40									
Vice President		1						254,266		
(4) Anissa Frucci	Less than									
Trustee	1 hour							0		
(5) Anthony Dalonges	Less than						ļ			
Trustee	1 hour					<u> </u>				
(6) Kenneth Oelkers	Less than									
Trustee	1 hour_		_					_		
(7) Joseph Filacanevo	Less than									
Trustee	1 hour			ļ						
(8)										
(9)										
(40)			_	-	<u> </u>	<u> </u>	<u> </u>		-	
(10)	}									
(11)					-					
(12)										
(12)			\vdash		\vdash		\vdash			
(13)										
(14)										

Part	VII Section A. Officers, Directors,	Trustees,	Key I	Em	plo	yee	s, an	d F	lighest Compe	nsated E	mploy	yees (d	ontir	nued)
	(A) Name and title	(B) Average hours per week	box	unles er and	Pos neck ss pe	rson	e than o is both or/trus	an tee)	(D) Reportable compensation from the	(E) Reportal compensa from rela	ation ited	com	other bensati	
		(list any hours for related organizations below dotted line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizati (W-2/1099-	MISC)		om the zation organiz	
(15)			-											
(16)			-											
(17)			-				<u> </u>			-			-	
(18)													<u> </u>	
(21)														
(22)														
(23)														
(24)			-											
(25)													<u></u>	
1b	Subtotal			<u> </u>			l	>	951,080					
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)	VII, Sectio	n A	٠				▶	951,080	-				
2	Total number of individuals (including but reportable compensation from the organic	t not limited	d to th	iose	list	ed	above	e) w		_	0,000	of		
													Yes	No
3	Did the organization list any former of employee on line 1a? If "Yes," complete 3							mpl	loyee, or highes	t compen	sated	3		√
4	For any individual listed on line 1a, is the organization and related organizations													
5	individual	 or accrue co	omoe	nsat	tion		m anv			ion or indi	vidual	4	√	
	for services rendered to the organization on B. Independent Contractors									•		5	·	✓
1	Complete this table for your five high													
	compensation from the organization. Rep		sation	1 TOI	tne	ca	ienda	r ye	(B)			(C)		year.
	Name and business add	ress 					_	_	Description of serv	rices		ompens	ation	
					,	******								
2	Total number of independent contractor received more than \$100,000 of compens		_					th	ose listed abov	e) who				

Part	VIII	Statement of Revenue						
		Check if Schedule O contains a re	spon	ise or note to an			· · · · ·	<u> </u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
nts Its	1a	Federated campaigns	1a	_		•		-
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b					
s, G Am	C	Fundraising events	1c					
Sitt Iar,	d	Related organizations	1d 1e					
ıs, (imi	e f	Government grants (contributions) All other contributions, gifts, grants,	16	·				
tior er S	'	and similar amounts not included above	1f					
ibu	g	Noncash contributions included in						
ontr od C		lines 1a-1f	1g	\$				
<u>2</u> <u>2</u>	h	Total. Add lines 1a-1f		. >				
45				Business Code	a .ee	<u> </u>		
Program Service Revenue	2a	Contributions from Container			2,310,000	2,310,000		
sen ue	b	Royalty Funds				·····		
gram Sen Revenue	c d							
gra Re	e				· -			
ro	f	All other program service revenue .			•			
ш.	g g	Total. Add lines 2a–2f		▶	2,310,000			
	3	Investment income (including divid	dends	s, interest, and				
		other similar amounts) .		▶	35,981	35,981		_
	4 Income from investment of tax-exempt bond			ond proceeds ►				
	5	Royalties	•	<u>.</u> . ▶				
	_	(i) Real		(ii) Personal				
	6a	Gross rents 6a						
	b	Less rental expenses 6b Rental income or (loss) 6c						
	c d	Net rental income or (loss)		▶				
	_	Gross amount from (i) Secunt	es	(II) Other				
	7a	sales of assets						
		other than inventory 7a						
يو	b	Less cost or other basis						
Revenue		and sales expenses . 7b						
ev.	С	Gain or (loss) . 7c						
	d	Net gain or (loss)		<u> </u>				
Other	8a	Gross income from fundraising						
0		events (not including \$ of contributions reported on line						
		1c). See Part IV, line 18	8a					
	b	Less direct expenses	8b					
	c	Net income or (loss) from fundraising		nts 🕨			· · · · · · · · · · · · · · · · · · ·	
		Gross income from gaming						
		activities See Part IV, line 19	9a					
	b	Less direct expenses .	9b					<u> </u>
	С	Net income or (loss) from gaming ac	tivitie	es 🕨			_	
	10a	Gross sales of inventory, less						
	_	returns and allowances	10a					
		Less cost of goods sold	10b	prv				
	С	Net income or (loss) from sales of in	vento	Business Code				
Miscellaneous Revenue	11a			Duaniesa Code		-		
scellaneo Revenue	i ia b							
ella	C					-		
isc	d	All other revenue						
Σ	е	Total. Add lines 11a-11d		▶				
	12	Total revenue. See instructions .		. ▶	2,345,981	2,345,981		

Section	in 501(c)(3) and 501(c)(4) organizations must comp	olete all columns All	other organizations	must complete colu	ımn (A)
000110	Check if Schedule O contains a response			mast complete cold	······ (/-y
Do no	t include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
	o, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		скрепаса	general expenses	· CAPCINGS
•	and domestic governments. See Part IV, line 21.			}	
2	Grants and other assistance to domestic		-		
_	individuals See Part IV, line 22			,	
_	·			·	<u></u>
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
	_				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	925,890	925,890		
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages .				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits		83,390		
10	Payroll taxes	39,508	39,508		
11	Fees for services (nonemployees)				
а	Management	350,004	350,004		
b	Legal	68,833	68,833		
C	Accounting	34,500	34,500		
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				· · · · · · · · · · · · · · · · · · ·
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				,,
а	Consulting	335,104	335,104		
b	Liability Insurance	125,068	125,068		
С	Miscellaneous	269,438	269,438		
d					
С	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	2,231,735	2,231,735		
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation. Check here $ ightharpoonup$ if				
	following SOP 98-2 (ASC 958-720)				

Р	art X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Pa	rt X <u>.</u>		🗆
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	181,139,1 <u>1</u> 2	_1	230,004,007
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	120,552,022	4	115,347,786
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
S	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges	39,529	9	56,438
,	10a	Land, buildings, and equipment cost or other			
		basis Complete Part VI of Schedule D 10a 1,454,430			_
	b	Less: accumulated depreciation 10b 1,384,605	43,669	10c	69,825
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11	0	12	0
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33) .	301,774,332	16	345,478,056
	17	Accounts payable and accrued expenses	186,040	17	159,093
	18	Grants payable		18	
	19	Deferred revenue	2,310,000		2,155,000
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	····
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			
Ë	23	Secured mortgages and notes payable to unrelated third parties .		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24) Complete Part X			
		of Schedule D	299,060,479		342,831,904
	26	Total liabilities. Add lines 17 through 25	301,556,519	26	<u>345,145,997</u>
nces		Organizations that follow FASB ASC 958, check here ▶ ☐ and complete lines 27, 28, 32, and 33.			
ala	27	Net assets without donor restrictions	217,813	27	332,059
1 B	28	Net assets with donor restrictions		28	
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here ▶ □ and complete lines 29 through 33.			
0	29	Capital stock or trust principal, or current funds		29	
et	30	Paid-in or capital surplus, or land, building, or equipment fund		30	<u></u> ,
ASE	31	Retained earnings, endowment, accumulated income, or other funds		31	
et.	32	Total net assets or fund balances	217,813		332,059
z	33	Total liabilities and net assets/fund balances	301,77 <u>4,332</u>	33	345,478,056
					Form 990 (2019)

Page	1	2

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orm 95	0 (2019)		Pa	ge 12
Part	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)		2,34	5,981
2	Total expenses (must equal Part IX, column (A), line 25)		2,23	1,735
3	Revenue less expenses Subtract line 2 from line 1		11	4,246
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4		21	7,81 <u>3</u>
5	Net unrealized gains (losses) on investments			
6	Donated services and use of facilities			
7	Investment expenses			
8	Prior period adjustments			
9	Other changes in net assets or fund balances (explain on Schedule O)			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line			
	32, column (B))		33	<u> 2,059</u>
Part	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. Cash Accrual Other			ì
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			- 1
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		
	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			
b	Were the organization's financial statements audited by an independent accountant?	2b		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			- 1
	separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of	ا ۽ ا		
	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	3ь		
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	1	, 990	
		Ford	. 441	וטחוטי

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SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2019

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

- 00	ction of holos organizations	mat have tree meet entree (closic	in ander econon ec	(.,,, complete rait in 2 20 i	
	organization answered "Yes see separate instructions), t	s," on Form 990, Part IV, line 5 (Proxy hen	y Tax) (see separate	e instructions) or Form 990)-EZ, Part V, line 35c (Proxy
• Se	ection 501(c)(4), (5), or (6) orga	anizations Complete Part III			
	of organization			Employer ide	ntification number
Contai	iner Royalty Central Collect	ion Fund			46 2758874
Part		e organization is exempt und	er section 501(c) or is a section 527	organization.
1	Provide a description o definition of "political car	f the organization's direct and in mpaign activities")	direct political ca	impaign activities in Part	t IV. (see instructions for
2	Political campaign activit	ty expenditures (see instructions)		▶ \$	0
3	Volunteer hours for politi	cal campaign activities (see instruc	ctions)		0
Part		e organization is exempt und			
1		excise tax incurred by the organization			
2		excise tax incurred by organization			
3	If the organization incurre	ed a section 4955 tax, did it file Fo	rm 4720 for this ye	ear? .	∐ Yes ∐ No
4a	Was a correction made?				. Yes No
b	If "Yes," describe in Part			\	() (0)
Part		e organization is exempt und			(c)(3).
1	activities	tly expended by the filing organiz		▶ \$	0
2	Enter the amount of the 527 exempt function acti	filing organization's funds contributies	outed to other org	anizations for section ▶ \$	
3	·	expenditures Add lines 1 and 2	. Enter here and	on Form 1120-POL, ▶ \$	0
4		n file Form 1120-POL for this year	?		Yes ✓ No
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to whorganization made payments. For each organization listed, enter the amount paid from the filing organization's function the amount of political contributions received that were promptly and directly delivered to a separate political organization as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information					ization's funds. Also enter political organization, such
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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Part II-A		Complete if the organizat section 501(h)).	on is exempt u	ınder section 5	01(c)(3) and file	d Form 5768 (ele	ction under
	Check ► ☐ If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).						
В	Check ▶	If the filing organization che	cked box A and '	'lımıted control" p	rovisions apply		
		Limits on Lo	obying Expendit	ures		(a) Filing	(b) Affiliated
		(The term "expenditures"	means amounts	paid or incurred	.)	organization's totals	group totals
1	la Totall	obbying expenditures to influent	ce public opinion	(grassroots lobby	ing)		
	b Total I	obbying expenditures to influent	ce a legislative bo	ody (direct lobbyin	g)		
	c Total I	obbying expenditures (add lines	1a and 1b)				<u> </u>
	d Other	exempt purpose expenditures .					
	e Total	exempt purpose expenditures (a	dd lines 1c and 1	d) .			
	f Lobby colum	ring nontaxable amount Enterns	the amount fr	om the following	g table in both		
	If the a	mount on line 1e, column (a) or (b)	is: The lobbying	nontaxable amoun	nt is:		-
	Not ove	er \$500,000	20% of the an	nount on line 1e			
	Over \$5	500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess	over \$500,000		
	Over \$1	1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess	over \$1,000,000		
	Over \$1	1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess of	over \$1,500,000		
	Over \$1	17,000,000	\$1,000,000				
	g Grassi	roots nontaxable amount (enter	25% of line 1f)	•	•		
	h Subtra	act line 1g from line 1a If zero or	less, enter -0-				
		act line 1f from line 1c If zero or					
		e is an amount other than zering section 4911 tax for this yea		1h or line 1i, did	the organization	file Form 4720	Yes No
	4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)						
		Lobbyi	ng Expenditures	During 4-Year A	veraging Period	r· ·	
	Cale	endar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2	2a Lobby	ing nontaxable amount					
		ing ceiling amount of line 2a, column (e))					
	c Total l	obbying expenditures					
	d Grassi	roots nontaxable amount					
		roots ceiling amount of line 2d, column (e))					
	f Grassi	roots lobbying expenditures					

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	iled	Forn	า 5768	ı	
	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed	(6	a)		(b)	
desci	aption of the lobbying activity.	Yes	No	A	mount	t
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:		à			
а	Volunteers?			j		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			<u> </u>		
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	, 				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6).)(5), d	or se	ction		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		✓
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		✓
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the	prior	year?	3	L	✓
Part	III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Of answered "Yes."				line 3	B, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				
а	Current year .		2a			(
b	Carryover from last year		2b			
c	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby					
	and political expenditure next year?		4			(
5	Taxable amount of lobbying and political expenditures (see instructions)		5			<u>`</u>
Par						`
Provid 2 (see	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated gro instructions); and Part II-B, line 1 Also, complete this part for any additional information	up lis	t), Pai	t II-A, I	ines 1	and
ine tu	nd was established in 2013. No political lobbying expenses have been incurred.					

Schedule C (Form	Schedule C (Form 990 or 990-EZ) 2019 Page 4					
Part IV	Supplemental Information (continued)					
	<u> </u>					
, 						

	•					
<u> </u>						
	•					

SCHEDULE D (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

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

Open to Public Inspection

Employer identification number

46 2758874 **Container Royalty Central Collection Fund** Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year . . . 1 2 Aggregate value of contributions to (during year) . 3 Aggregate value of grants from (during year) 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No **Conservation Easements.** Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (for example, recreation or education) ☐ Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements . . . 2b 2c Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year ▶____ Number of states where property subject to conservation easement is located ▶ 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items. Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Part	III Organizations Maintaining	Collection	ns of Art, I	listorical	Treasures	, or O	ther Similar As	sets (con	tınued)
3	Using the organization's acquisition, collection items (check all that apply).		and other re	cords, che	ck any of th	e follov	ving that make s	ignificant i	use of its
а	☐ Public exhibition				or exchang				
b	Scholarly research		,	e 🗌 Othe	r				
C	Preservation for future generations								
4	Provide a description of the organizat	tion's collec	tions and e	kplain how	they further	the or	ganization's exem	npt purpos	e in Part
_	XIII				المسلم المسلم		a au athau amaile		
5	During the year, did the organization assets to be sold to raise funds rather								☐ No
Part	IV Escrow and Custodial Arra			· ·					
	Complete if the organization 990, Part X, line 21.	answered	"Yes" on I	Form 990,	Part IV, line	e 9, or	reported an am	ount on I	-orm
1a	Is the organization an agent, trustee, included on Form 990, Part X? .	•					r other assets no	ot 🗌 Yes	□ No
b	If "Yes," explain the arrangement in Pa	art XIII and	complete the	e following t	table	_			
						-		nount	
C	Beginning balance	•	• •	• •	•	10			
d	Additions during the year .	•	•			10		_	
e f	Distributions during the year . Ending balance	•	• •			11			
2a	Did the organization include an amour	nt on Form 9	 990 Part X	 line 21 for i	escrow or ci			? ☐ Yes	☐ No
b									
Par				·		•			
	Complete if the organization	answered	"Yes" on I	orm 990,	Part IV, line	e 10.			
		(a) Current	year (b	Prior year	(c) Two year	rs back	(d) Three years back	(e) Four y	ears back
1a	Beginning of year balance								
b	Contributions							1	
С	Net investment earnings, gains, and losses								
d	Grants or scholarships							 	
е	Other expenditures for facilities and								
	programs				 			+	
f	Administrative expenses End of year balance				 			+	
g 2	Provide the estimated percentage of t	he current v	ear end bal	ance (line 1	a. column (a	i)) held	as [.]	1	
a	Board designated or quasi-endowmer				3 , (,,			
b	Permanent endowment ►	%	•••••			•			
С	Term endowment ▶ %								
	The percentages on lines 2a, 2b, and	2c should e	qual 100%						
3a	Are there endowment funds not in the	e possessio	n of the org	anızatıon th	nat are held	and ac	lmınıstered for th		
	organization by:								es No
	(i) Unrelated organizations .		•					3a(i)	
	(ii) Related organizations .						•	3a(ii)	-
b	If "Yes" on line 3a(ii), are the related of						•	3b	
4 Pari	Describe in Part XIII the intended uses VI Land, Buildings, and Equip		inization s e	Idowinent	iuiius				
Fail	Complete if the organization		"Yes" on I	Form 990	Part IV line	e 11a	See Form 990.	Part X. lir	ne 10.
	Description of property		ost or other bas		or other basis		Accumulated	(d) Book	
	2000 pilot of property	1 ' '	(investment)		other)		epreciation	• •	
1a	Land								
b	Buildings								
С	Leasehold improvements		9,	627			4,299		5,328
d	Equipment		21,	150			16,825		4,325
<u>e</u>	Other	·	1,423,			<u> </u>	1,363,481		60,172
Total.	Add lines 1a through 1e. (Column (d) n	nust equal F	orm 990, Pa	art X, colum	n (B), line 10	JC).	. ▶		69,825

Part VII	Investments – Other Securities. Complete if the organization answered "Yes" on Fo	rm 990, Part IV, lın	e 11b. See Form 990, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial	derivatives		
(2) Closely h	eld equity interests		
(3) Other			
(A)			
(D)			
(E)			
(F)		-	
(G)			
(H)	mn (b) must equal Form 990, Part X, col. (B) line 12)	-	
Part VIII	Investments—Program Related.		
Part VIII	Complete if the organization answered "Yes" on Fo	rm 990 Part IV lin	e 11c. See Form 990. Part X. line 13
	(a) Description of investment	(b) Book value	(c) Method of valuation
	(a) Description of investment	(b) Book value	Cost or end-of-year market value
(1)			
(2)			·-·
(3)		1	
(4)			
(5)			
(6)			
(7)			
(8)		-	
(9)			
Total. (Colui	mn (b) must equal Form 990, Part X, col (B) line 13) . >		
Part IX	Other Assets. Complete if the organization answered "Yes" on Fo	rm 990 Part IV lin	e 11d. See Form 990. Part X. line 15
	(a) Description	000, 1 0	(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)	-		
(6)			
(7)			
(8)		· · · · · · · · · · · · · · · · · · ·	
(9)			
	mn (b) must equal Form 990, Part X, col (B) line 15)	<u> </u>	. ▶
Part X	Other Liabilities. Complete if the organization answered "Yes" on For	rm 990, Part IV, lın	e 11e or 11f. See Form 990, Part X,
	line 25.		#4 Parallel
1.	(a) Description of liability		(b) Book value
(1) Federal in			
	ocal Container Royalty Funds		51,026,202
	nited States Maritime Alliance, Ltd.		37,196,810
	Assistance Payable		10,000,000
	nent Distribution Payable		91,484,845
(6) Interest I			346,126
	Escrow Payable		152,777,92
(8)	<u> </u>	_ 	
(9)	mn (b) must equal Form 990, Part X, col (B) line 25.)		242 925 996
	uncertain tax positions. In Part XIII, provide the text of the footn	ote to the organization	342,831,904
	s liability for uncertain tax positions under FASB ASC 740. Check		

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	Return.
	Total revenue, gains, and other support per audited financial statements	1 2 345 981
1	Amounts included on line 1 but not on Form 990, Part VIII, line 12.	1 2,345,981
2 a	Net unrealized gains (losses) on investments	
b	Donated services and use of facilities	
C	Recoveries of prior year grants	
d	Other (Describe in Part XIII)	
e	Add lines 2a through 2d	2e 0
3	Subtract line 2e from line 1	3 2,345,981
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	
a	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 0	
b	Other (Describe in Part XIII.) 4b 0	
C	Add lines 4a and 4b	4c 0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5 2,345,981
Part		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	
1	Total expenses and losses per audited financial statements	1 2,231,735
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
а	Donated services and use of facilities 2a 0	
b	Prior year adjustments	
С	Other losses	
d	Other (Describe in Part XIII) 2d 0	
е	Add lines 2a through 2d	2e 0
3	Subtract line 2e from line 1	3 2,231,735
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	
b	Other (Describe in Part XIII)	
С	Add lines 4a and 4b	4c 0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5 2,231,735
	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional in	

Schedule D (Fo	chedule D (Form 990) 2019 Page 5					
Part XIII	Supplemental Information (continued)					
••						
		••••••				
	<u> </u>	•				
		-				
		·				

SCHEDULE J (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Compensated Employees

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

46 2758874 **Container Royalty Central Collection Fund Questions Regarding Compensation** Yes Nο 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. Housing allowance or residence for personal use First-class or charter travel Payments for business use of personal residence ☐ Travel for companions Tax indemnification and gross-up payments Health or social club dues or initiation fees ☐ Discretionary spending account Personal services (such as maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 2 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ☐ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant Compensation survey or study ☐ Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization. a Receive a severance payment or change-of-control payment? 4a b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4h c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any 5 compensation contingent on the revenues of a The organization? Any related organization? If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a a The organization? Any related organization? If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, or row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)—(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(C) Retirement and other deferred compensation	Compensation Comp	C) Retirement and other deferred toompensation	ē 1	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)
compensation compensation compensation	reportable compensation	compensatio	_		
(1)					
(ii) 357,782 35,901 12,000				19,400	425,083
(ii) 263.470 26.471 1,190				19,400	310,531
(ii) 220,173 22,093 12,000				19,400	273,666
		1	+		
			+		
(1)			+		
			-		
(1)		1	+		1
(t)			+		
(9)		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	-		
(ii)					
(9)			-		-
(1)					
			_		
(i)					
(0)					
(0)					
(0)					
(1)					
(0)					
(0)			_		
(0)					
(1)					
(1)					
(ii)					
(1)					
(ii)			_		

Schedule J (Form 990) 2019

	Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part or any additional information.										ic (000 mrc3) L elisbody
	ns requred for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a										
Part III Supplemental Information	Provide the information, explanation, or description or any additional information.										

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.

2019

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

46 2758874 **Container Royalty Central Collection Fund** Part VI, Section B, Line 11b - Upon completion of the form 990, it is reviewed by our attorneys for accuracy. It is then forwarded to the President/Trustee for his review and signature. Part III, form 990, Line 4d - Amount of expenses required to fulfill the fund's purpose of collecting contributions from management and distributing those funds to joint labor-management employee benefit funds. Part VI, Section C, Line 19 - At the end of each accounting cycle, the President and Trustees are provided with a copy of the financial statements for their review. When the year is concluded, the President takes an active role in any discussions that involve the independant accountants that prepare the annual audited financial statements. Further, upon request from any interested party, the audited financial statement is provided.

Schedule O (Form 990 or 990-EZ) (2019)	Page 2
Name of the organization	Employer identification number
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