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Form	220	ļ

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not onter accial accurity numbers on this form as it may be made nublic

2018 . . .

OMB No. 1545-0047

		of the Treasury nue Service	 Go to www.irs.gov/Form990 for instructions and the latest informatio 		Inspection
A	For the	e 2018 calen	dar year, or tax year beginning 07/01 , 2018, and ending	06/30	, 20 19
в	Check if	f applicable:	Name of organization FLORESTA USA INCORPORATED	D Employ	ver identification number
	Address	s change	Doing business as Plant With Purpose		33-0052976
	Name c	hange	Number and street (or P.O. box if mail is not delivered to street address) Room/suite	E Telepho	one number
	Initial re	turn	747 Morena Blv Suite 100		858-274-3718
	Final retu	urn/terminated	City or town, state or province, country, and ZIP or foreign postal code		
			San Diego, CA, 92117	G Gross	eceipts \$ 5,570,829
	Applicat	tion pending	Name and address of principal officer: Scott Sabin H(a) Is this	a group return fo	r subordinates? 🗌 Yes 🗹 No
		4	747 Morena Blvd Suite 100, San Diego, CA 92117 H(b) Are	all subordinate	es included? 🗌 Yes 🗌 No
<u> </u>	Tax-exe	empt status:	✓ 501(c)(3) 501(c) () ◄ (insert no.) 4947(a)(1) or 527	attach a list. (see instructions)
J	Website			oup exemption	n number 🕨
к		organization:	Corporation ☐ Trust ☐ Association ☐ Other ► L Year of formation: 198	34 M State	e of legal domicile: CA
P	art I	Summa			
	1	Briefly des	cribe the organization's mission or most significant activities: Plant With Purpe	ose is a Ch	istian development
Activities & Governance		organizatio	n that transforms lives in rural areas around the world where poverty and environm	nental degr	adation intersect. We
nar			on Schedule O, Statement 2)		
ver	2	Check this	box \blacktriangleright if the organization discontinued its operations or disposed of more the	an 25% of	its net assets.
3	3	Number of	voting members of the governing body (Part VI, line 1a)	. 3	16
Š	4	Number of	independent voting members of the governing body (Part VI, line 1b)	. 4	15
ties	5	Total num	per of individuals employed in calendar year 2018 (Part V, line 2a)	. 5	20
tivi	6	Total num	per of volunteers (estimate if necessary)	. 6	52
Ac	7a	Total unre	ated business revenue from Part VIII, column (C), line 12	. 7a	0
	b	Net unrela	ed business taxable income from Form 990-T, line 38	. 7b	0
			Prior	Year	Current Year
e	8	Contributio	ons and grants (Part VIII, line 1h)	8,207,601	5,546,886
nue	9	Program s	ervice revenue (Part VIII, line 2g)	0	0
Revenue	10	Investmen	t income (Part VIII, column (A), lines 3, 4, and 7d)	2,886	20,854
Œ	11	Other reve	nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,340	0
	12	Total rever	ue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	8,213,827	5,567,740
	13	Grants and	l similar amounts paid (Part IX, column (A), lines 1–3)	2,221,783	2,460,267
	14	2002 - 20 C C C C C C C C C C C C C C C C C C	aid to or for members (Part IX, column (A), line 4)	0	0
Se	15	Salaries, of	her compensation, employee benefits (Part IX, column (A), lines 5–10)	1,602,477	1,708,477
Expenses	16a	Profession	al fundraising fees (Part IX, column (A), line 11e)	0	0
xpe	b	Total fund	aising expenses (Part IX, column (D), line 25) ► 551,162		
Ú	17		enses (Part IX, column (A), lines 11a–11d, 11f–24e)	479,103	540,295
	18	Total expe	nses. Add lines 13–17 (must equal Part IX, column (A), line 25)	4,303,363	4,709,039
	19	Revenue le	ess expenses. Subtract line 18 from line 12	3,910,464	858,701
Ces			Beginning of	Current Year	End of Year
sets	20	Total asse	s (Part X, line 16)	4,360,376	5,246,862
Net Assets or Fund Balances	21	Total liabil	ties (Part X, line 26)	92,719	120,504
	1.000	Net assets	or fund balances. Subtract line 21 from line 20	4,267,657	5,126,358
P	art II	Signati	re Block		and a second

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

	but Sabin			4/27/2020	
Sign	Signature of officer			Date	
Here	Scott Sabin, Executive Director				
_	Type or print name and title		23		
Paid Preparer	Print/Type preparer's name	Preparer's signature Date		Check if self-employed	PTIN
Use Only	Firm's name			Firm's EIN ►	
coc only	Firm's address ►			Phone no.	
May the IRS	discuss this return with the pre-	eparer shown above? (see instruc	ctions)		. 🗌 Yes 🗌 No
For Paperwo	rk Reduction Act Notice, see the	separate instructions.	Cat. No. 11282Y		Form 990 (2018)

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Part	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Plant With Purpose, a Christian development organization, reverses deforestation and poverty around the world by transforming
	the lives of the rural poor. For more than 30 years, Plant With Purpose has been a leader in linking international community
	development and environmental solutions, working with family farmers in strategic areas where environmental degradation and (Continued on Schedule O, Statement 3)
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 596,061 including grants of \$ 518,227) (Revenue \$ 445,253)
та	HAITI: Reports of national hardship in Haiti often make the news. While most are aware of the hurdles Haitians face, including severe drought, many are unaware of the subtle victories and progress that families are also experiencing. Plant With Purpose
	partners with over 400 Sustainable Development Groups, which have led to increased family savings and 50 percent higher crop yields on average. To date, partnering farmers have planted over 3.7 million trees and continue to turn the tide of deforestation in
	their country. Farmers also reach beyond the immediate needs of their families as they lead the way in local conservation efforts.
	Community members are shifting the way they use their land to improve their own quality of life while also protecting vulnerable habitats. These undertakings inspire neighbors to act and provide an example to our international family.
4b	(Code:) (Expenses \$ 490,870 including grants of \$ 420,477) (Revenue \$ 390,102) DOMINICAN REPUBLIC: Fiscal year 2019 was another exciting year for Plant With Purpose Democratic Republic of the Congo
	(DRC) as we expanded work into a neighboring watershed, Kambekulu. Rounding out just four years of partnership in the DRC,
	the team is encouraged by deepened impact in Kakumba and a strong start in Kambekulu. Partnering farmers in Kambekulu work
	in collaboration with schools, churches, and local institutions, having already formed 12 savings groups and planted over 67,000
	trees in just one year. These partners are digging in deep to create lasting change and pursue peace and reconciliation despite
	persistent insecurity in the region. Plant With Purpose is poised for additional growth into a third watershed in fiscal year 2020.
4c	(Code:) (Expenses \$ 452,700 including grants of \$ 361,855) (Revenue \$ 277,942)
	TANZANIA: Plant With Purpose Tanzania continues to grow and garner wider attention in Tanzania. In fiscal year 2019 the team
	received the 2018 Environmental Conservation Award from the Kilimanjaro Regional Commissioner for their work in conservation
	and empowerment of farming families in the Kilimanjaro region. Plant With Purpose Tanzania now partners with over 10,000
	families who have on average 2.7 times the amount of savings as non-partnering families and are 63 percent more likely to send
	their daughters to secondary school. Additionally, Plant With Purpose Tanzania families are planting over 10 times the number of
	trees that non-partnering families plant, and benefitting from 38 percent higher crop yields. In the past 15 years, partnering
	families have planted nearly 12 million trees, which are healing streams and increasing water availability in their communities.
4d	Other program services (Describe in Schedule O.) See Schedule O. Statement 4
4d	Other program services (Describe in Schedule O.) See Schedule O, Statement 4 (Expenses \$ 2,286,313 including grants of \$ 1,159,708) (Revenue \$ 1,276,374)

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Part	V Checklist of Required Schedules			
		r	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	~	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	<u> </u>	~
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		~
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		~
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D, Part III</i>	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? <i>If "Yes," complete Schedule D, Part IV</i> .	9		~
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	~	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, 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? <i>If "Yes," complete Schedule D, Part VII</i>	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? <i>If "Yes," complete Schedule D, Part VIII</i>	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? <i>If "Yes," complete Schedule D, Part IX</i>	11d		v
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	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)? <i>If "Yes," complete Schedule D, Part X</i>	11f		~
-	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	~	
ь 13	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 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13	~	~
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		V
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? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	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? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	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? <i>If "Yes," complete Schedule G, Part II</i> .	18	~	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19		~
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		V
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		-
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		~

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Part	IV 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? <i>If "Yes," complete Schedule J</i> .	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		~
b C	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		-
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		~
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? <i>If "Yes," complete Schedule L, Part I</i>	25b		~
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26		~
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		~
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, or key employee? If "Yes," complete Schedule L, Part IV	28a		~
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	~	
с	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		~
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? <i>If "Yes," complete Schedule M</i>	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		~
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? <i>If "Yes," complete Schedule R, Part I</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	~	
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		~
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? <i>If "Yes," complete Schedule R, Part VI</i>	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	2	
Part				
1	Check if Schedule O contains a response or note to any line in this Part V	• •	• •	
	Enter the number reported in Day 2 of Form 1000. Enter 0, if we we will be the		Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable11Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable10	5		
b	Did the organization comply with backup withholding rules for reportable payments to vendors and			
v	reportable gaming (gambling) winnings to prize winners?	1c	~	

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Part	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
		s	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 20			
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)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		V
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		~
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).			
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		V
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	~	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	~	
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			
	and services provided to the payor?	7a	~	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	~	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		~
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		~
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		~
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		~
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		~
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	•		
•	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	0-		
a L	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter:	9b		
10	Initiation fees and capital contributions included on Part VIII, line 12			
a L	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
ь 11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
b	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		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	124		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		_
u	Note. See the instructions for additional information the organization must report on Schedule O.	Tou		
b	Enter the amount of reserves the organization is required to maintain by the states in which			
, N	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		v
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			-
	excess parachute payment(s) during the year?	15		~
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		V
	If "Yes," complete Form 4720, Schedule O.			

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Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 th	rough 7b below,	and	for a	"No"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes				
	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 .	1a 16			
	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 in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent	1b 15			
1000	Did any officer, director, trustee, or key employee have a family relationship or a business re		2		
2	any other officer, director, trustee, or key employee?	elationship with	2		~
3	Did the organization delegate control over management duties customarily performed by or u	inder the direct	-		
•	supervision of officers, directors, or trustees, or key employees to a management company or othe		3		~
4	Did the organization make any significant changes to its governing documents since the prior Form 99		4		~
5	Did the organization become aware during the year of a significant diversion of the organizatio		5		~
6	Did the organization have members or stockholders?		6		~
7a	Did the organization have members, stockholders, or other persons who had the power to e	lect or appoint			
	one or more members of the governing body?		7a		~
b	Are any governance decisions of the organization reserved to (or subject to approval		Territory.		
	stockholders, or persons other than the governing body?		7b		~
8	Did the organization contemporaneously document the meetings held or written actions und	lertaken during			
	the year by the following:		0.		
a L	The governing body?		8a 8b	~	
ь 9	Each committee with authority to act on behalf of the governing body?		do	•	
9	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		~
Secti	on B. Policies (This Section B requests information about policies not required by the		-	ode.)	
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		~
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		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	re filing the form?	11a	~	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			2-222	-
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	~	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give		12b	~	
С	Did the organization regularly and consistently monitor and enforce compliance with the p		10		
13	describe in Schedule O how this was done		12c 13	~	<u> </u>
14	Did the organization have a written document retention and destruction policy?		14	v	-
15	Did the process for determining compensation of the following persons include a review a		14		
10	independent persons, comparability data, and contemporaneous substantiation of the deliberation				
а	The organization's CEO, Executive Director, or top management official		15a	V	
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 simil	ar arrangement			
	with a taxable entity during the year?		16a		~
b	If "Yes," did the organization follow a written policy or procedure requiring the organization				
	participation in joint venture arrangements under applicable federal tax law, and take steps to				
<u>.</u>	organization's exempt status with respect to such arrangements?		16b		
	on C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ► See Schedule O, Stat	************************		+1.0	04/->
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable (3)s only) available for public inspection. Indicate how you made these available. Check all that		(Sec	uon t	501(C)
	 ✓ Own website ✓ Another's website ✓ Upon request ✓ Other (explain in Sch 				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documer		erect	nolicy	/ and
	financial statements available to the public during the tax year.	ite, connict of int		sonoy	, and
20	State the name, address, and telephone number of the person who possesses the organizatio	n's books and re	cords		
	Floresta USA Incorporated, (858)274-3718				

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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per	box,	unles	Pos ieck is pe	erson	e than c is both or/trust	an	(D) Reportable compensation	(E) Reportable compensation from	(F) Estimated amount of
	week (list any hours for related organizations below dotted line)	Individua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
Scott Sabin	50.00	1								
President	0.00	~		v		~		134,000	0	0
Cindy Chen	0.00				1			,,		
Board Member	0.00	~						0	0	0
Steve Dhanens	0.00									
Board Member	0.00	~						0	0	0
Judy Enns	0.00									
Board Member	0.00	~						0	0	0
Janet Farley	0.00									
Board Member	0.00	~						0	0	0
Jeff Kahler	0.00									
Treasurer	0.00	~						0	0	0
Eric Kaiser	0.00									
Board Member	0.00	~						0	0	0
Ted Law	0.00									
Board Member	0.00	~						0	0	0
Cathi Lundy	0.00									
Board Member	0.00	~						0	0	0
Cindy Outlaw	0.00									
Chair	0.00	~						0	0	0
Darrell Shrader	0.00									
Board Member	0.00	~						0	0	0
Nick Wiik	0.00				1					
Board Member	0.00	~						0	0	0
Denise Yohn	0.00									
Secretary	0.00	~						0	0	0
Doug Satre	40.00									
Strategic Partnership Director	0.00					~		119,296	0	0

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mploy	/ees	s, ai	nd H	lighes	st C	ompensated E	mployees (contin	nued)		
					- 23	C)							
	(A)	(B)	(do n	ot ch		sition	e than o	ne	(D)	(E)		(F)	
	Name and title	Average	box,	unles	s pe	erson	is both	an	Reportable	Reportable	124.52	stimated	
		hours per week (list any			1.	-	or/trust		compensation from	compensation from related	ar	nount of other	
		hours for	Individual trustee or director	Institutional trustee	Officer	Key employee	High	Former	the	organizations	922228	npensati	on
		related organizations	lirec	ituti	Cer	em	hest	mer	organization (W-2/1099-MISC)	(W-2/1099-MISC)		rom the janizatio	n
		below dotted	tor tor	onal		ploy	e		(112) 1000-101000			d relate	
		line)	uste	trus		lee	nper				org	anizatio	าร
			ee	stee			Highest compensated employee						
				6,000		-	ed						
	Mitchell	40.00							10100000	177			
Direct	tor of International Programs	10.00	-	-	-	-	~	-	108,727	0	1		0
				-	-	+		-					
		+											
				-	-	+		-					
						1		-					
		+											
2					-	-		-					
			-			\vdash							
			-										
						1							
		+											
-													
			1										
						1							
1b	Sub-total							►	362,023	0			0
с	Total from continuation sheets to Part	VII, Sectio	n A						and the second second second				
d	Total (add lines 1b and 1c)								362,023	0			0
2	Total number of individuals (including but	t not limited	to th	iose	e list	ted	above	e) w	ho received me	ore than \$100,00	00 of		
	reportable compensation from the organi	ization 🕨							3				
												Yes	No
3	Did the organization list any former of												
	employee on line 1a? If "Yes," complete	Schedule J	for su	ıch	ind	ivid	Jal	- 3 %			3	-	~
4	For any individual listed on line 1a, is the	e sum of re	portal	ble	con	npe	nsatio	n a	nd other comp	ensation from th	ne 🛛		
	organization and related organizations												
	individual											_	~
5	Did any person listed on line 1a receive of												
	for services rendered to the organization	? If "Yes," c	compl	ete	Sch	nedi	ule J f	or s	such person		5		~
100	on B. Independent Contractors		0.00	82	44	in al		40	2003 W 60	11.00 XX 1.00 XX		08	
1	Complete this table for your five highest compensation from the organization. Rep year.												ax
	(A)								(B)		(0	2)	
	Name and business add	lress							Description of s	ervices	Compe		
None													

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 0

Page 8

Form 990 (2018)

Statement of Revenue

Part VIII Check if Schedule O contains a response or note to any line in this Part VIII **(C)** Unrelated (D) Revenue (A) Total revenue (B) Related or exempt business excluded from tax revenue under sections 512–514 revenue Contributions, Gifts, Grants and Other Similar Amounts 1a Federated campaigns . . . 1a 0 b Membership dues 1b 0 1c c Fundraising events . . . 235,998 d Related organizations . . . 1d 0 Government grants (contributions) е 1e 0 All other contributions, gifts, grants, f and similar amounts not included above 1f 5,310,888 Noncash contributions included in lines 1a-1f: \$ 0 g Total. Add lines 1a-1f. h 5,546,886 ► Program Service Revenue **Business Code** 2a b С d е f All other program service revenue . Total. Add lines 2a-2f . . g 0 3 Investment income (including dividends, interest, and other similar amounts) ► 20,854 20,854 0 0 Income from investment of tax-exempt bond proceeds 4 0 0 0 0 5 Royalties 0 0 0 0 (ii) Personal (i) Real 6a Gross rents . . **b** Less: rental expenses c Rental income or (loss) 0 0 d Net rental income or (loss) ► (i) Securities (ii) Other 7a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses . С Gain or (loss) . 0 0 d Net gain or (loss) • . . Other Revenue 8a Gross income from fundraising events (not including \$ 235,998 of contributions reported on line 1c). See Part IV, line 18 а **b** Less: direct expenses b С Net income or (loss) from fundraising events . 9a Gross income from gaming activities. See Part IV, line 19 a **b** Less: direct expenses b Net income or (loss) from gaming activities . . С -10a Gross sales of inventory, less returns and allowances . . . а 3,089 Less: cost of goods sold . . . b 3,089 b Net income or (loss) from sales of inventory . -С 0 0 0 0 **Business Code** Miscellaneous Revenue 11a b _____ С d All other revenue Total. Add lines 11a-11d . е 0 2 Total revenue. See instructions 12 0 5,567,740 20,854 0

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Section	501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a response				
Do not	include amounts reported on lines 6b, 7b,	(A)	(B) Program service	(C) Management and	(D) Fundraising
8b, 9b,	and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0	0		
	Grants and other assistance to domestic				
	ndividuals. See Part IV, line 22	0	0		
3 (Grants and other assistance to foreign				
c	organizations, foreign governments, and foreign				
i	ndividuals. See Part IV, lines 15 and 16	2,460,267	2,460,267		
4 E	Benefits paid to or for members	0	0		
	Compensation of current officers, directors,				
t	rustees, and key employees	401,996	259,565	60,763	81,668
	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
F	persons described in section 4958(c)(3)(B)	0	0	0	C
	Other salaries and wages	992,069	619,464	151,080	221,525
	Pension plan accruals and contributions (include				
S	section 401(k) and 403(b) employer contributions)	88,953	56,169	13,034	19,750
	Other employee benefits	129,736	83,251	19,173	27,312
	Payroll taxes	95,723	59,166	14,436	22,121
	Fees for services (non-employees):				
	Management	11,991	687	11,047	257
	∟egal	0	0	0	C
	Accounting	29,000	0	29,000	
	_obbying	0	0	0	0
	Professional fundraising services. See Part IV, line 17	0			C
	nvestment management fees	0	0	0	C
	Other. (If line 11g amount exceeds 10% of line 25, column				
	A) amount, list line 11g expenses on Schedule O.)	17,697	17,697	0	0
	Advertising and promotion	77,745	54,612	1.5.555.44	23,133
	Office expenses	68,506	19,240	5,554	43,712
	nformation technology	18,162	7,864	1,063	9,235
	Royalties	0	0	0	0
	Occupancy	96,216	48,969	19,693	27,554
		113,337	79,809	1,147	32,381
	Payments of travel or entertainment expenses for any federal, state, or local public officials				
		0	0	0	0
	Conferences, conventions, and meetings .	3,597	2,099	651	847
	nterest	0	0	0	0
	Depreciation, depletion, and amortization	6,371	3,938	961	100
		5,617	936	3,937	<u>1,472</u> 744
	Other expenses. Itemize expenses not covered	5,017	330	5,557	/44
	above (List miscellaneous expenses in line 24e. If				
	ine 24e amount exceeds 10% of line 25, column				
	A) amount, list line 24e expenses on Schedule O.)				
a	Donor Vision Trips to Programs	42,680	42,680	0	0
	Outreach Events	34,768	7,378	32	27,358
1000	State Registration Fees (City/State)	4,742	1,241	362	3,139
	Merchandise for Resale	9,866	912	0	8,954
-	All other expenses	0,000		-	-,
	Total functional expenses. Add lines 1 through 24e	4,709,039	3,825,944	331,933	551,162
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs rom a combined educational campaign and				
f	undraising solicitation. Check here 🕨 🥅 if				
f	ollowing ŠOP 98-2 (ASC 958-720)				

Form 990 (2018)

Part X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Pa	t X		
		(A) Beginning of year		(B) End of year
1	Cash—non-interest-bearing	1,008,776	1	242,607
2	Savings and temporary cash investments		2	1,427,657
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	3,057,964	4	3,406,074
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
	organizations (see instructions). Complete Part II of Schedule L		6	
7 8	Notes and loans receivable, net		7	
~ U	Inventories for sale or use	and the second second	8	
9	Prepaid expenses and deferred charges	173,767	9	41,988
10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 25,949			
b	Less: accumulated depreciation 10b 0	16,400	10c	25,949
11	Investments – publicly traded securities	28,307	11	28,307
12	Investments – other securities. See Part IV, line 11	66,348	12	67,263
13	Investments – program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11	8,814	15	7,017
16	Total assets. Add lines 1 through 15 (must equal line 34)	4,360,376	16	5,246,862
17	Accounts payable and accrued expenses	92,719	17	120,504
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and			
	disqualified persons. Complete Part II of Schedule L		22	
20	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D		25	
26	Total liabilities. Add lines 17 through 25	92,719	26	120 504
20	Organizations that follow SFAS 117 (ASC 958), check here ► ✓ and	92,719	20	120,504
3	complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	918,841	27	1,479,284
28	Temporarily restricted net assets	3,292,266	28	3,590,524
29	Permanently restricted net assets	56,550	29	56,550
27 28 29 30 31 32 33	Organizations that do not follow SFAS 117 (ASC 958), check here ► □ and complete lines 30 through 34.			
3 30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds .		32	
33	Total net assets or fund balances	4,267,657	33	5,126,358
34	Total liabilities and net assets/fund balances	4,360,376	34	5,246,862

Form 990 (2018)

Form 99	90 (2018)			Pa	ge 12
Par					
	Check if Schedule O contains a response or note to any line in this Part XI		6		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		5,56	7,740
2	Total expenses (must equal Part IX, column (A), line 25)	2		4,70	9,039
3	Revenue less expenses. Subtract line 2 from line 1	3		85	8,701
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . $\ \ .$	4		4,26	7,657
5	Net unrealized gains (losses) on investments	5			0
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		5,12	6,358
Part	XII Financial Statements and Reporting				22 - 29
	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 Cother				
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain in			
	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 comp	oiled or			
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b			2b	~	
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	ed on a			
	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 ow			20043	
	of the audit, review, or compilation of its financial statements and selection of an independent accou	ntant?	2c	~	
	If the organization changed either its oversight process or selection process during the tax year, ex	plain in			
	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 under	rgo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits.	3b		

Form 990 (2018)

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.

OMB No. 1545-0047 2018

Open to Public

artment of th nal Revenue	
 	S2 S2

Inspection ٩r

Daut	Because for Dublic Charity Status (All annoninations must a smulate this n	aut) Can in atminist
FLORESTA	A USA INCORPORATED	33-0052976
vame of the	organization	Employer identification numbe

Part I **Reason for Public Charity Status** (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1
- 2
- A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 4 hospital's name, city, and state:
- An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.)
- A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8
- 9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving a the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.
 - Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, С its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.
 - Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.
 - Check this box if the organization received a written determination from the IRS that it is a Type I. Type II. e functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations

Provide the following information about the supported organization(s). a

(i) Name of supported organization	(ii) EIN	EIN (iii) Type of organization (lis) (described on lines 1–10 lis) above (see instructions))		organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
			Yes	No			
(A)							
(B)							
(C)			0				
(D)							
(E)							
Total							

12 12

Contraction of the	lle A (Form 990 or 990-EZ) 2018						Page 2
Part	J J J J J J J J J J J J J J J J J J J						
	(Complete only if you checked the Part III. If the organization fails to						any under
Secti	ion A. Public Support			, p.	ener compre		
	dar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	4,612,628	3,526,158	3,822,598	8,210,941	5,546,886	25,719,211
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
3	The value of services or facilities furnished by a governmental unit to the organization without charge	0	0				
4	Total. Add lines 1 through 3	4,612,628	3,526,158	0 3,822,598	0 8,210,941	5,546,886	25,719,211
355	10 10 10 10 10 10 10 10 10 10 10 10 10 1	4,012,020	3,520,150	3,822,396	8,210,941	5,540,000	25,719,211
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						6 000 000
6	Public support. Subtract line 5 from line 4			· · · · · · · · · · · · · · · · · · ·			6,926,000
	ion B. Total Support						18,793,211
-	idar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	4,612,628	3,526,158	3,822,598	8,210,941	5,546,886	25,719,211
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	7,089	3,499	6,726	1,593	16,448	35,355
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	0	0	0	0	0	0
11	Total support. Add lines 7 through 10						25,754,566
12	Gross receipts from related activities, etc	. (see instructio	ns)			12	
13	First five years. If the Form 990 is for the		's first, second	d, third, fourth,	or fifth tax ye	ear as a section	n 501(c)(3)
	organization, check this box and stop he	CONTRACTOR AND AND A					· · ▶ □
Secti	on C. Computation of Public Suppor	×					
14	Public support percentage for 2018 (line 6		10 T 1			14	72.97 %
15 16a	Public support percentage from 2017 Sch 33 ¹ / ₃ % support test—2018. If the organi box and stop here. The organization qua	zation did not	check the box	on line 13, an	d line 14 is 33		
b	- manage the second fill approx	zation did not o	check a box o	n line 13 or 16a	a, and line 15		
17a		018. If the orga eets the "facts- facts-and-circu	nization did ne and-circumsta umstances" te	ot check a box ances" test, ch st. The organiz	on line 13, 16 eck this box a ation qualifies	and stop here. as a publicly	Explain in
b	10%-facts-and-circumstances test — 20 15 is 10% or more, and if the organization r Explain in Part VI how the organization r supported organization	ation meets the neets the "fact	e "facts-and-c s-and-circums	ircumstances" stances" test. 7	test, check t he organizatio	his box and s on qualifies as	top here.

Schedule A (Form 990 or 990-EZ) 2018

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

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

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
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						
4	Tax revenues levied for the						
-	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
5	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3					-	
74	received from disqualified persons .						
120	Amounts included on lines 2 and 3		-				
D	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
-	Add lines 7a and 7b						+
с 8	Public support. (Subtract line 7c from						
0	line 6.)						
Secti	on B. Total Support		1.1. Pri	10		-	
	dar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	(u) 2014	(6) 2010	(0) 2010	(a) 2017	(0) 2010	
10a	Gross income from interest, dividends,						
ivu	payments received on securities loans, rents,						
	royalties, and income from similar sources .						
h	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
~	Add lines 10a and 10b						_
11	Net income from unrelated business						
11	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						_
••	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for th	e organizatio	n's first, secon	d. third. fourth	, or fifth tax ve	ar as a sec	ction 501(c)(3)
C.05.0	organization, check this box and stop her						22 U =
Secti	on C. Computation of Public Suppor	Vertication of the second second					
15	Public support percentage for 2018 (line 8			13. column (fl)		15	%
16	Public support percentage from 2017 Sch					16	%
	on D. Computation of Investment Inc						
17	Investment income percentage for 2018 (I	and the second se		y line 13. colu	mn (f))	17	%
18	Investment income percentage from 2017					18	%
19a	33 ¹ / ₃ % support tests-2018. If the organi						
	17 is not more than 33 ¹ / ₃ %, check this box a						
b	331/3% support tests -2017. If the organize		••••••••••••••••••••••••••••••••••••••				
~	line 18 is not more than 331/3%, check this b						
20	Private foundation. If the organization did			1. St		5000 J	
	in the organization and	onoon u		,,,,			

Schedule A (Form 990 or 990-EZ) 2018

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. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in Part VI.*
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in Part VI.*
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

신 신영하지 않고 가지?	le A (Form 990 or 990-EZ) 2018		ŀ	Page
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		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the 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		-
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the 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		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization</i> (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? <i>If "Yes," describe in Part VI the role the organization's</i>	_		

supported organizations played in this regard.

Section E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). 1

- The organization satisfied the Activities Test. Complete line 2 below. а
- The organization is the parent of each of its supported organizations. *Complete line 3 below.* b
- c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).
- 2 Activities Test. Answer (a) and (b) below.
- 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.
- Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more b 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.
- Parent of Supported Organizations. Answer (a) and (b) below. 3
- a 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? Provide details in Part VI.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3

2a

2b

3a

Yes No

³b Schedule A (Form 990 or 990-EZ) 2018

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B-Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C – Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	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 emergency temporary reduction (see instructions).	6		
7 Check have if the surrout user is the surroutization's first as a new functional	he in t	a superior of Tama a Ul summary	1

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2018

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	zations (continued)	5550 - 5555
Sect	ion D—Distributions			Current Year
1	Amounts paid to supported organizations to accomplish e	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	empt purposes of suppo	orted	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
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.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whic (provide details in Part VI). See instructions.	h the organization is res	ponsive	
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sect	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
a	From 2013			
b	From 2014			
	From 2015		-	
d	From 2016			
e	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
5 h			£	
1	Carryover from 2013 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from			
	Section D, line 7: \$			
-	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount		1	
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а				
b	Excess from 2015			
С	Excess from 2016			
d	Excess from 2017			
е	Excess from 2018		0	

Schedule A (Form 990 or 990-EZ) 2018

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE D (Form 990)

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

L	OMB No. 1545-0047
	2018
	Open to Public
	Inspection

	ent of the Treasury Revenue Service		Attach to Form 990. 990 for instructions and the latest infor	mation. Open to Public
2	of the organization			Employer identification number
	ESTA USA INCO			33-0052976
Par	t I Organi	izations Maintaining Donor Adv	vised Funds or Other Similar Fu	nds or Accounts.
195 197		ete if the organization answered '		
	÷	-	(a) Donor advised funds	(b) Funds and other accounts
1	Total number	at end of year		
2	Aggregate val	ue of contributions to (during year)		
3	Aggregate val	ue of grants from (during year) .		
4		ue at end of year		
5		ization inform all donors and donor organization's property, subject to th		
6	only for charit	ization inform all grantees, donors, a able purposes and not for the benef permissible private benefit?		for any other purpose
Par		rvation Easements.		
	the second se	ete if the organization answered '		·
1	 Preservation Protection 	conservation easements held by the on of land for public use (e.g., recreat of natural habitat on of open space	tion or education) 🗌 Preservation of	of a historically important land area of a certified historic structure
2	Complete line	s 2a through 2d if the organization he he last day of the tax year.	eld a qualified conservation contribut	ion in the form of a conservation Held at the End of the Tax Year
а	Total number	of conservation easements		2a
b		restricted by conservation easement	s	2b
с	Subserver Mercennes Streamer	nservation easements on a certified h		
d	Number of co	onservation easements included in		t on a
3	tax year ►			rminated by the organization during the
4		tes where property subject to conse		
5	violations, and	anization have a written policy req enforcement of the conservation ea	sements it holds?	· · · · · · · · · · · Yes 🗌 No
6	Staff and volunt	teer hours devoted to monitoring, inspec	cting, handling of violations, and enforci	ng conservation easements during the year
7	▶\$			g conservation easements during the year
8	and section 17			· · · · · · · 🗌 Yes 🗌 No
9		scribe how the organization reports of , and include, if applicable, the text of		e and expense statement, and inancial statements that describes the
		accounting for conservation easeme		
Part	III Organi	izations Maintaining Collection	s of Art, Historical Treasures, o	r Other Similar Assets.
	Comple	ete if the organization answered '	'Yes" on Form 990, Part IV, line 8	3.
1a	works of art,	13 AS	assets held for public exhibition, e	ts revenue statement and balance sheet education, or research in furtherance of at describes these items.
b	works of art, public service,	historical treasures, or other similar , provide the following amounts relat	assets held for public exhibition, eing to these items:	s revenue statement and balance sheet education, or research in furtherance of
	(i) Revenue in	cluded on Form 990, Part VIII, line 1		► \$
2	If the organiza	uded in Form 990, Part X	historical treasures, or other simila	· · · · ▶ \$ · · · · ▶ \$ ar assets for financial gain, provide the items:
a b	Revenue inclu			> \$

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedu	le D (Form 990) 2018					Page 2
Part	y y y					
3	Using the organization's acquisition, a collection items (check all that apply):	accession, and ot	her records, cheo	k any of the follo	owing that are a sig	gnificant use of its
а	Public exhibition		d 🗌 Loan	or exchange pro	arams	
b	Scholarly research					
c	 Preservation for future generations 					
4	Provide a description of the organizat		and explain how t	hey further the o	rganization's exem	pt purpose in Part
	XIII.					
5	During the year, did the organization assets to be sold to raise funds rather					r 🗌 Yes 🗌 No
Part				5		
	Complete if the organization	a de 🖤 de la seconda	" on Form 990, I	Part IV, line 9, o	r reported an am	ount on Form
-10	990, Part X, line 21. Is the organization an agent, trustee,	austadian ar ath	or intermediany f	ar contributions	ar other apacta pa	•
1a	included on Form 990, Part X?					
						🗌 Yes 🗌 No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	ete the following t	able:	An	nount
	Desire half					loun
c	Beginning balance				C	
d	Additions during the year				d	
e	Distributions during the year				e	
f	Ending balance			CARA 20 20 20 1	lf	
2a	Did the organization include an amour					
The second se	If "Yes," explain the arrangement in Patent Endowment Funds.	art XIII. Check here	e if the explanatio	n nas been provi	ded on Part XIII .	· · · Ц
Par	Complete if the organization	annuared "Vee"	" on Form 000	Dart IV line 10		
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
					57 (CAR)	La constante de
1a	Beginning of year balance	66,348	65,137	63,14		
b	Contributions	0	0		0 0	0
с	Net investment earnings, gains, and					
		915	1,311	2,08		
d	Grants or scholarships	0	0		0 0	0
е	Other expenditures for facilities and			5		-
	programs	0	0	100.00	0 0	
f	Administrative expenses	0	100			Contraction of the second
g	End of year balance	67,263	66,348			64,964
2	Provide the estimated percentage of t	all a Gran was survey and a survey and the		g, column (a)) held	as:	
a	Board designated or quasi-endowmer		<u>5</u> %			
b		35 %				
С	Temporarily restricted endowment					
0-	The percentages on lines 2a, 2b, and 2			at ana halal anal a	duals interest fact the	27
за	Are there endowment funds not in the organization by:	e possession of th	le organization th	at are nelo ano a	aministered for the	
						Yes No
	(i) unrelated organizations				· · · · · ·	3a(i) 🗸
12	(ii) related organizations					3a(ii) 🗸
1.1	If "Yes" on line 3a(ii), are the related of Describe in Part XIII the intended uses					3b
4 Dout			on s endowment i	unas.		
Part			" F 000 I	Daut IV/ line 11a	Cas Farma 000	Deut V line 10
	Complete if the organization					
	Description of property	(a) Cost or ot (investme			Accumulated depreciation	(d) Book value
1a	Land		0	0		0
b	Buildings		0	0	0	0
с	Leasehold improvements		0	0	0	0
d	Equipment		25,949	0	0	25,949
е	Other		0	0	0	0
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 99	90, Part X, columi	n (B), line 10c.) .)	25,949

Schedule D (Form 990) 2018

Part VII	Investments-Other Securities.		
	Complete if the organization answered "Yes" on Form 990, Part	IV, line 11b. See I	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			
	eld equity interests		
(3) Other			
(A)			
(B) (C)			
(D)			
(E)			-
(E)		5 0 0	
(G)			
) must equal Form 990, Part X, col. (B) line 12.) ►	a <mark></mark>	
Part VIII	Investments – Program Related.		
	Complete if the organization answered "Yes" on Form 990, Part	IV, line 11c. See F	Form 990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation:
			Cost or end-of-year market value
(1)			
(2)			
(3)			
_(4)			
(5)		-	
(6)			
(7)			
(8)			
(9) Total (Column (b) must equal Form 990, Part X, col. (B) line 13.) 🕨		
Part IX	Other Assets.	18	
	Complete if the organization answered "Yes" on Form 990, Part	IV, line 11d. See I	Form 990, Part X, line 15.
	(a) Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
_(5)			
(6)			
(7)			
(8)			
(9) Total, (Colur	nn (b) must equal Form 990, Part X, col. (B) line 15.)	97 07 07 07 07 08 08 0	. ►
Part X	Other Liabilities.		
	Complete if the organization answered "Yes" on Form 990, Part	IV, line 11e or 11f	. See Form 990, Part X,
	line 25.	anna Caraonana - Alain an Tanan - An San	ng ték di kering kan kang baha alak kering na kan ing ng kang bahar kering kering kering kering kering kering k
1.	(a) Description of liability		(b) Book value
(1) Federal in	come taxes		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) Total (Column (b	must aqual Form 000, Dart V, col. (PUling 25)		
iotal. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 🕨		

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedu	le D (Form 990) 2018	Page 4
Part		Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	
1	Total revenue, gains, and other support per audited financial statements	1 5,567,740
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.)	
е	Add lines 2a through 2d	2e 0
3	Subtract line 2e from line 1	3 5,567,740
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 4a 0	
b	Other (Describe in Part XIII.)	
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 5,567,740
Part		r Return.
-	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	
1	Total expenses and losses per audited financial statements	1 4,709,039
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	
a	Donated services and use of facilities	
b	Prior year adjustments	
c	Other losses	
d	Other (Describe in Part XIII.)	0
e	Add lines 2a through 2d	2e 0
3	Subtract line 2e from line 1	3 4,709,039
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a b	Investment expenses not included on Form 990, Part VIII, line 7b4a0Other (Describe in Part XIII.)4b0	
с С		4c 0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 4,709,039
Part		4,703,033
2; Par Schee	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inf lule D, Part V, Line 4 - Endowment funds are for the purpose of accruing interest. Board designated endowm determined at time of donation, interest may be used for emergency reserves funds upon approval by the P	ormation. ents, and as per donor
direct		
	0.5.	***************************************

SCHEDULE F (Form 990) Sta		State	ement of	f Activitie	s Outside the Uni	ited States		OMB No. 1545-0047
(Forn	n 990)		te if the organ		2018			
	nent of the Treasury	-	► Attach to Form 990. To to www.irs.gov/Form990 for instructions and the latest information.					Open to Public
-	Revenue Service		10 10 11 11 11 11 11	.govn onnisso i				Inspection
	of the organization	RPORATED					Employer	identification number 33-0052976
Par		Information), Part IV, line		ties Outside	the United States. Con	nplete if the orga	anization	answered "Yes" on
1	For grantmak	ce, the grante	e organizatio ees' eligibility		cords to substantiate the a ts or assistance, and the s			
2	For grantmak outside the Un		in Part V the	e organization	's procedures for monitorin	ng the use of its	grants a	nd other assistance
3	Activities per F	Region. (The fo	llowing Part	I, line 3 table o	can be duplicated if addition	nal space is need	ded.)	
	(a) Regior		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity liste a program se describe specif service(s) in th	ervice, ic type of	(f) Total expenditures for and investments in the region
(1)	Sch F, Stmt 1							
(2)								
(3)								
(4)				-				
(5)								
(6)								
(7)								
(8)						-		
(9)								
(10)								
(11)								
(12)						-		
(13)								
(14)								
(15)								
(16)								
(17) 3a	Subtotal							
b	Total from sheets to Part							

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

17

237

c Totals (add lines 3a and 3b)

2,460,267

Schedule F (Form 990) 2018

Part	Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed								
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(i of no	
			Sch F, Stmt 2						
							-		
-									
_									

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exer
	by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter
3	Enter total number of other organizations or entities

Schedule F (Form 990) 2018

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) of none
(1)						
(2)		_				<u> </u>
(3)						<u> </u>
(4)		_				<u> </u>
(5)		_				
(6)		_				
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17)						
(18)						

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Ye

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

Schedule F (Form 990) 2018

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

Schedule F, Part I, Line 2 - Organizations that receive funding from Plant With Purpose are direct program partners that align with our mission, vision, values, and programmatic model of transformational change. Funding agreements are reviewed by Plant With Purpose's Director of International Programs and signed on an annual basis by Plant With Purpose's CEO and the local program CEO. Fund disbursements are reviewed and approved by USA program staff and USA Director of Finance, and reviewed by the local country accounting and management staff. Program Partner financial reports are compiled by local accounting staff, and reviewed quarterly by USA Director of International Programs, program officers, and accounting staff.

Schedule F, Part V, Statement 1

Form: Schedule F (2018)

Page: 1

FLORESTA USA INCORPORATED

EIN: 33-0052976

Part I, Line 3

Accounts and Activities Outside the United States

		Offices	Employees	Total
Region Activities Services	Central America and the Caribbean Program Services HAITI, DOMINICAN REPUBLIC: Environmental restoration at a community-led watershe level; economic development through a savings group methodology; and spiritual renew through partnerships with local churches.		70	938,704
Region Activities Services	North America (including Canada and Mexico, but not the United States) Program Services MEXICO: Environmental restoration at a community-led watershed level; economic development through a savings group methodology; and spiritual renewal through partnerships with local churches.	2	23	322,732
Region Activities Services	South Asia Program Services THAILAND: Environmental restoration at a community-led watershed level; economic development through a savings group methodology; and spiritual renewal through partnerships with local churches.	1	10	138,500
Region Activities Services	Sub-Saharan Africa Program Services BURUNDI, DEMOCRATIC REPUBLIC OF THE CONGO, ETHIOPIA, TANZANIA: Environmental restoration at a community-led watershed level; economic development through a savings group methodology; and spiritual renewal through partnerships with local churches.	7	134	1,060,331
	Total:	17	237	2,460,267

Schedule F, Part V, Statement 2

Form: Schedule F (2018)

Page: 2

Grants To Organization Outside US

FLORESTA USA INCORPORATED

EIN: 33-0052976

Part II, Line 1

		Cash Grant	Non-Cash Assistance
Region Grant Cash Disbursement Desc. of Non-Cash Asst. Valuation	Sub-Saharan Africa Tanzania, Burundi, Ethiopia, Congo: Environmental restoration at a community- led watershed level; economic development through a savings group methodology; and spiritual renewal through partnerships with local churches. Wire transfer	1,060,331	(
Region Grant Cash Disbursement Desc. of Non-Cash Asst. Valuation	Central America and the Caribbean HAITI, DOMINICAN REPUBLIC:Environmental restoration at a community-led watershed level; economic development through a savings group methodology; and spiritual renewal through partnerships with local churches. Wire transfer	938,704	0
Region Grant Cash Disbursement Desc. of Non-Cash Asst. Valuation	North America (including Canada and Mexico, but not the United States) MEXICO: Environmental restoration at a community-led watershed level; economic development through a savings group methodology; and spiritual renewal through partnerships with local churches. Wire transfer	322,732	C
Region Grant Cash Disbursement Desc. of Non-Cash Asst. Valuation	South Asia THAILAND: Environmental restoration at a community-led watershed level; economic development through a savings group methodology; and spiritual renewal through partnerships with local churches. Wire transfer	138,500	0

epartn	990 or 990-EZ)		► A	ttach to Form	990 or Form			20 18 Open to Public
	Revenue Service	► (Go to www.irs.gov	Form990 for i	nstructions a	nd the latest informat		Inspection
	f the organization						Employer identif	
1. 1. 1. 1.	ESTA USA INCOR		Commission : []				7.5	-0052976
Par	Form 990	0-EZ filers are n	ot required to	complete	this part.	vered res on F	orm 990, Part IV,	line 17.
1	Indicate wheth	er the organizatio	n raised funds t	through any	of the follo	owing activities. Cl	neck all that apply.	
а	Mail solicita	ations		е [] Solicitati	on of non-governr	nent grants	
b	Internet and	d email solicitation	าร	f 🗌		on of government		
С	Phone solic	tations		g 🗌] Special 1	undraising events		
d	In-person s	olicitations						
2a b	or key employe If "Yes," list the	es listed in Form	990, Part VII) o individuals or e	r entity in co entities (fund	onnection v	with professional fu	ers, directors, trus undraising services ents under which th	? 🗌 Yes 🗌 N
	(i) Name and addres or entity (fund		(ii) Activity	custody o	draiser have r control of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
				Yes	No			
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
otal	2.2							
							or has been notif	

 Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

			(a) Event #1 Annual Gala	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
			(event type)	(event type)	(total number)	coi. (c)
Revenue	1	Gross receipts	301,530			301,530
æ	2	Less: Contributions	0			0
	3	Gross income (line 1 minus	0			<u> </u>
_		line 2)	301,530			301,530
	4	Cash prizes	0			0
	5	Noncash prizes	0			0
nses	6	Rent/facility costs	0			0
Direct Expenses	7	Food and beverages	0		0	0
Direct	8	Entertainment	0		0	0
	9	Other direct expenses .	65,532			65,532
	10	Direct expense summary. Ad	d lines 4 through 9 in c	olumn (d)		65,532
	11	Net income summary. Subtra	ict line 10 from line 3, c	olumn (d)	🏲	235,998
Pa	art III	Gaming. Complete if the \$15,000 on Form 990-EZ	e organization answe	ered "Yes" on Form §	990, Part IV, line 19,	or reported more than
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Reve	1	Gross revenue				

æ	1	Gross revenue				
ses	2	Cash prizes				
Exper	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses .				
	6	Volunteer labor	☐ Yes % ☐ No	□ Yes% □ No	☐ Yes % ☐ No	
	7	Direct expense summary. Add	l lines 2 through 5 in co	olumn (d)		
	8	Net gaming income summary.	. Subtract line 7 from li	ne 1, column (d)		
	a Is	nter the state(s) in which the org the organization licensed to cor "No," explain:	nduct gaming activities	in each of these states	5?	∐Yes ∐No

	Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?	🗌 Yes 🗌 No
b	If "Yes," explain:	

Schedu	le G (Form 990 or 990-EZ) 2018 Page 3									
11	Does the organization conduct gaming activities with nonmembers?									
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?									
13	Indicate the percentage of gaming activity conducted in:									
а	The organization's facility 13a %									
b	An outside facility									
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:									
	Name ►									
	Address ►									
15a	Does the organization have a contract with a third party from whom the organization receives gaming									
iva	revenue?									
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the									
	amount of gaming revenue retained by the third party ► \$									
с	If "Yes," enter name and address of the third party:									
	Name ►									
	Address ►									
16	Gaming manager information:									
	Name ►									
	Gaming manager compensation									
	Description of services provided ►									
	Director/officer Employee Independent contractor									
17	Mandatory distributions:									
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?									
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or									
	spent in the organization's own exempt activities during the tax year ► \$									
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.									

Schedule G (Form 990 or 990-EZ) 2018

SCI	IEDUL	LE L	

(Form 990 or 990-EZ)

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. ► Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

Name of the organization

Part III

EL OPESTA LISA INCORPORATED

Employer identification number 22 0050070

FLOR	ESTA USA INCORPORATED			33-0052976	
Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25					e 40b.
1	(a) Name of disgualified person	(b) Relationship between disqualified person and	(c) Desc	ription of transaction	(d) Corrected?

	(a) Name of disqualitied person	organization	(c) Description of transaction	Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
2		ed by the organization managers or dis			
3	Enter the amount of tax, if any, o	on line 2, above, reimbursed by the organi	zation		

Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of Ioan	from	an to or 1 the zation?	(e) Original principal amount	(f) Balance due	(g) In c	lefault?	by bo	proved bard or hittee?	(i) Wi agree	
			То	From			Yes	No	Yes	No	Yes	No
(1)				_								
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
10)												
otal	· · · · · ·		• •		. ►	\$						

Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Cat. No. 50056A

Schedule L (Form 990 or 990-EZ) 2018

OMB No. 1545-0047 20

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Open To	P P

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

Part IVBusiness Transactions Involving Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person		(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
					Yes	No
	stantial contributor	Related to substantial cor	43,236	wages	_	~
(2)						
(3)					_	
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
Part V Supple Provide	mental Information. additional information f	or responses to questions	on Schedule L (see	instructions).		

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
 Attach to Form 990.

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

20**18** Open to Public Inspection

FLORESTA			
FLORESTA	USA	INCORT	ORATED

Employer identification number
33-0052976

Part	Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method c noncash con			
1	Art-Works of art							
2	Art-Historical treasures							
3	Art-Fractional interests				· ·			
4	Books and publications							
5	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities-Publicly traded	~	10	218,317	FMV			
10	Securities-Closely held stock .							
11	Securities – Partnership, LLC, or trust interests							
12	Securities-Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate – Residential							
16	Real estate - Commercial							
17	Real estate-Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts				С			
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► ()							
26	Other ► ()							
27	Other ► ()							
28	Other► ()	8 8						
29								
	which the organization completed	Form 8283	3, Part IV, Donee Acknowle	dgement	29		Vee	Na
							Yes	NO
30a	During the year, did the organizat 28, that it must hold for at least t							
	to be used for exempt purposes t					30a		~
b	If "Yes," describe the arrangement	t in Part II.	38400MP					
31	Does the organization have a							
	contributions?					31	~	
32a	Does the organization hire or use							
	contributions?					32a	$ \rightarrow $	~

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

Schedule M (F	form 990) 2018 Page 2
Part II	Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether
	the organization is reporting in Part I, column (b), the number of contributions, the number of items received,
	or a combination of both. Also complete this part for 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.
 Go to www.irs.gov/Form990 for the latest information.



Department of the Treasury Internal Revenue Service Name of the organization

FLORESTA USA INCORPORATED

Employer identification number 33-0052976

	Form 990, Part I	II, Line 2 - In FY 2019	we launched a new pro	gram in the country of Ethiopia
--	------------------	-------------------------	-----------------------	---------------------------------

Form 990, Part VI, Section B, Line 11b - Form 990 draft was distributed by email to all governing members of the board prior to the electronic filing of Form 990.

Form 990, Part VI, Section B, Line 12c - If the organization engages in any conflicts of interest, the transaction or relation must first be disclosed to and approved by the board (excluding the participation and vote of the member involved in the related party transaction, if applicable). It is the job of the governing board and executive management to be aware of all conflicts of interests and reveal them to the governing board. If the conflict is in relation to anyone in the governing board, the member of the party is asked to leave during the applicable discussion and voting portion of the meeting. Additionally, on an annual basis, every board member is required to read and sign acknowledgement of the Organization's Conflict of Interest Policy, which includes a space for each board member to bring up any noticed conflicts of interest that may have not been addressed. Each member's signed agreement is then filed in the Organization's records.

Form 990, Part VI, Section B, Line 15 - CEO PERFORMANCE REVIEWS: Once a year, the Executive Committee meets with the CEO for his/her annual performance review and evaluation. In preparation for this review, the Executive Committee, with the participation of the Director of Finance & Administration, conducts evaluative research into comparative and equitable compensation of the CEO (including alignment with internal historical compensation trends) based upon others in a similar position and in relation to organization size and geographical location--while ensuring the organizational standard of equitable pay occurs around the 50th percentile. At least four external sources (traditional salary surveys, live peer data, etc) are referenced. At such time, the Executive Committee reviews performance, offers suggestions on improvements, sets goals for the following year, and negotiates salary adjustments based upon prepared research. Complete records are kept on the performance evaluation and the discussions at the review. There are no conflicts of interests among the Executive Committee and the CEO. The last time a performance evaluation was conducted for the CEO was August 2018. Performance check-in meetings are conducted 3 times a year. The last check-in for FY2019 occurred June 2019. ***KEY EMPLOYEE PERFORMANCE REVIEWS: The following process applies to all employees, whether a "key employee" or not. The same evaluation process is performed with key employees, where Quadrimester Performance check-ins are conducted between the employee and the CEO; and an Annual Evaluation, including compensation review, is performed between the key employee and the CEO. Compensation is determined based on current market rate, which includes key criteria of position, years in position, organization budget size, and employee geographical location. Market Rate data is obtained by a live peer database (PayScale) and cross-referenced with at least 2 other traditional survey sources. The last Annual Evaluation, including compensation review, of key employees was conducted July 2018. The last check-in for FY2019 occurred June 2019. ***MISC: For all employees (executive, key, and others), if personnel issues occur throughout the year, the issue is discussed between any and all persons involved, the CEO, HR and/or the immediate supervisor, and either or both the Internal Affairs Committee and the Executive Committee. Probationary or terminal decisions are always made with the consensus of the immediate supervisor (if applicable), the CEO, and either or both the Internal Affairs Committee and Executive Committee.

Form 990, Part VI, Section C, Line 19 - Governing documents and Conflict of Interest Policy are available to the public upon request.
Financial Statements are available on the financial page of our website, in addition to available on watchdog sites such as Guidestar,
Charity Navigator, etc.

Cat No 51056K

Form: Form 990 (2018)

Page: 1

Reasonable Cause Explanations

FLORESTA USA INCORPORATED

EIN: 33-0052976

Header Section

Explanation

Form 8868 was submitted and approved due to the fact that it took several months to finalize our audited financial statements.

Form: Form 990 (2018)

Page: 1

Activity Or Mission Description

FLORESTA USA INCORPORATED

EIN: 33-0052976

Part I, Line 1

Description

equip impoverished farming families to change their circumstances, provide for their children, and live with God-given hope and dignity. We do this through sustainable agriculture training, environmental restoration, savings-led micro-finance, church mobilization, and local leadership development.

Form: Form 990 (2018)

Page: 2

Mission Description

FLORESTA USA INCORPORATED

EIN: 33-0052976

Part III, Line 1

Description

poverty intersect. Plant With Purpose currently works in Burundi, Congo, the Dominican Republic, Ethiopia, Haiti, Mexico, Tanzania, and Thailand, employing an integrated methodology that combines environmental restoration, economic empowerment, and spiritual renewal. Activities include watershed restoration, reforestation, sustainable agriculture training, savings-and-loan groups, local leadership development, and supporting outreach efforts of local churches.

Schedule O	Statement 4
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FLORESTA USA INCORPORATED

EIN: 33-0052976

Part III, Line 4d

Page: 2	Other Program Services Accomplishments		r a	t III, Line 4d
Activity Code	Description	Expense	Grants	Revenue
	MEXICO For over 20 years, Plant With Purpose Mexico has pursued holistic transformation. Despite prolonged drought, this past year yielded exceptional growth in Sustainable Development Groups. With 125 groups total, Plant With Purpose Mexico has mobilized over 1,700 farming families to gain total member equity of \$201,758 USD without any outside capital. Our impact studies show that partnering families in Mexico have nearly three times the amount of savings as non-partnering families, and are 77 percent more likely to send their daughters to secondary school. Plant With Purpose Mexico families are applying 146 percent more sustainable farming techniques than non-participants. Their farms are 47 percent more diverse, leading to better nutrition, increased yield, and greater financial stability.	380,666	322,732	365,115
	BURUNDI Our partners in Burundi continue to implement sustainable development, exuding light in an area of historical insecurity. Partnering families are applying 41 percent more sustainable farming techniques compared to non-partnering families and have 2.5 times the amount of savings. Further, they are planting over twice as many trees per year, working to restore their land and entire watersheds. They continue to seek partnerships with organizations and research institutes that offer additional resources, ultimately equipping them to demonstrate innovative farming techniques to new partners.	367,762	283,225	248,062
	ETHIOPIA Plant With Purpose Ethiopia, which launched less than a year ago, is off to a strong start. With 13 Sustainable Development Groups and 20 church collaborations, the team is now partnering with more than 300 farming families to pursue sustainable agriculture, grow in faith, improve local livelihoods, and conserve historic church forests. Recently, northwestern Ethiopia's church forests have garnered international attention thanks to articles in National Geographic, Nature, Christianity Today, and the BBC. Thorough baseline studies will allow our team to measure progress in the sub-watershed of Zragn over the coming years as partners learn skills to prevent erosion, pursue savings, and increase biodiversity.	332,689	234,483	399,926
	CONGO Fiscal year 2019 was another exciting year for Plant With Purpose Democratic Republic of the Congo (DRC) as we expanded work into a neighboring watershed, Kambekulu. Rounding out just four years of partnership in the DRC, the team is encouraged by deepened impact in Kakumba and a strong start in Kambekulu. Partnering farmers in Kambekulu work in collaboration with schools, churches, and local institutions, having already formed 12 savings groups and planted over 67,000 trees in just one year. These partners are digging in deep to create lasting change and pursue peace and reconciliation despite persistent insecurity in the region. Plant With Purpose is poised for additional growth into a third watershed in fiscal year 2020.	254,972	180,768	185,142
	THAILAND The Plant With Purpose Thailand team has played a key role as an advocate for ethnic minority groups in the northern region of the country. This past year, Plant With Purpose Thailand participated in the Thailand Indigenous Peoples Day, which included over 1,500 people from 40 different ethnicities. There they shared best practices for forest management and for including women and youth in community development work. United, there are more opportunities for vulnerable families to protect their resources, seek education, and gain citizenship. As trust within partnering communities grows, farmers are increasingly implementing Plant With Purpose methods, from savings groups to sustainable agriculture to tree planting. Partnering farmers in Thailand apply three times the number of sustainable farming techniques as non-participants, and plant five times as many trees.	200,938	138,500	78,129
	PROGRAM EDUCATION & AWARENESS Plant With Purpose USA has also greatly expanded its efforts across the United States to become a leading voice on how Christians	749,286		0

are called to steward the environment. We are currently developing a greater library of educational resources to be widely accessible online. In 2019 we launched the Grassroots podcast, a forum where leading voices on faith and the environment join voices from marginalized communities. Guest speakers include pioneers in sustainable development, environmental concerns, faith practices, and poverty alleviation. Through these avenues, Plant With Purpose's influence continues to expand both within the U.S. and abroad.

Total:

2,286,313 1,159,708 1,276,374

Page 6 Part VI, Section C, Lien 17 States Where Copy Of Return Is Filed States Where Copy Of Return Is Filed States States Where Copy Of Return Is Filed States Where Copy Of Return Is Filed States Where Copy Of Return Is Filed States Where Copy Of Return Is Filed States Where Copy Of Return Is Filed States Where Copy Of Return Is Filed States Where Copy Of Return Is Filed States Where Copy Of Return Is Filed States Where Copy Of Return Is Filed States Where Copy Of Return Is Filed States Where Copy Of Return Is Filed States Where Copy Of Return Is Filed States Where Copy Of Return Is Filed MI States Where Copy Of Return Is Filed States Where Copy Of Return Is Filed NI States Where Copy Of Return Is Filed States Where Copy Of Return Is Filed NI States Where Copy Of Return Is Filed States Where Copy Of Return Is Filed NI States Where Copy Of Return Is Filed States Where Copy Of Return Is Filed	Schedule O, Statement 5		FLORESTA USA INCORPORATED
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SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
 Attach to Form 990.

. . .

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

Department of the Treasury Internal Revenue Service Name of the organization

FLORESTA USA INCORPORATED

Part I	Identification of Disregarded Entities.	Complete if the organization answered '	'Yes" on Form 990, Part IV, line 33.
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(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Pa one or more related tax-exempt organizations during the tax year.

(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity stati (if section 501(c)(3
savings groups, agroforestry,	Ethiopia	501c3	
	Primary activity	Primary activity Legal domicile (state or foreign country)	Primary activity Legal domicile (state or foreign country) Exempt Code section savings groups, Ethiopia 501c3

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat. No. 50135Y

Schedule R (Form 990) 2018

Part III Identification of I because it had on	Related Organizations e or more related orga	s Taxable nizations	e as a Partners treated as a pa	ship. Complete if Irtnership during	the organization the tax year.	ation answere	d "Ye	es" oi	n
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(I Disprop	h)	Γ
							Yes	No	Ĺ
_(1)									
(2)									
(3)									
(4)									
(5)									
(6)									

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	end-c
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						

Schedule R (Form 990) 2018

Part	Transactions With Related Organizations. Complete if the organization answ	ere	d "Y	'es"	or	n Fo	orm	990), P	art l	V, li	ine	3
Note	Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.												-
1	During the tax year, did the organization engage in any of the following transactions with one	or n	nore	rela	atec	or	gan	izatio	ons	liste	d in	Pa	rts
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity												
ь	Gift, grant, or capital contribution to related organization(s)				*								
С	Gift, grant, or capital contribution from related organization(s)									23			
d	Loans or loan guarantees to or for related organization(s)						2						
е	Loans or loan guarantees by related organization(s)				÷	਼	4			2		÷	
f	Dividends from related organization(s)								•				
g	Sale of assets to related organization(s)												
h	Purchase of assets from related organization(s)												
i	Exchange of assets with related organization(s)				×	×						×	
j	Lease of facilities, equipment, or other assets to related organization(s)	(.)	• •	•	•					8	• •		
k	Lease of facilities, equipment, or other assets from related organization(s)	7 2 0			÷	si.	5			2			
1	Performance of services or membership or fundraising solicitations for related organization(s)												
m	Performance of services or membership or fundraising solicitations by related organization(s)								•				
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)								•	•			
0	Sharing of paid employees with related organization(s)		• •		·		•	• •	•	•			
p	Reimbursement paid to related organization(s) for expenses												
P Q	Reimbursement paid by related organization(s) for expenses												
ч					•	•		• •		•		•	
r	Other transfer of cash or property to related organization(s)	•			•		ł		•				
S	Other transfer of cash or property from related organization(s)												_
_2	If the answer to any of the above is "Yes," see the instructions for information on who must c	omp	olete	this	s lin	e, iı	nclu	Iding	CO	vere	d re	latio	on
	(a) Name of related organization			(b) ansa pe (a	ction			A	mou	(c) unt inv	olve	d	
			ty	he (s	(—s)								
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Schedule R (Form 990) 2018

Part VI	Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Par
Provide the	e following information for each entity taxed as a partnership through which the organization conducted more than five percent of its

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under cestions 512, 514)	organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportiona allocations?		
			sections 512-514)	Yes	No	1		Yes	No	
(1)										
(2)										
(3)	•									
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(10)										
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(15)										
(16)										

Supplemental Information. Part VII Provide additional information for responses to questions on Schedule R. See instructions. Schedule R, Part I - Plant With Purpose has a subsidiary organization in Ethiopia, which exists to conduct program services within rural communities in Ethiopia according to our programmatic model of transformational change. To file a For 990 as accurate as possible, and according to our interpretation of Form 990 instructions, we are disclosing this subsidiary information on Schedule R, Parts I and V as related tax-exempt organizations. ----------