_	qqn
Form	220

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

Department of the Treasury Internal Revenue Service Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A	For the		dar year, or tax year beginning 07/01 , 2019, and ending	0(/2		,20 20
				06/3		
в		applicable:	C Name of organization FLORESTA USA INCORPORATED		DEmp	loyer identification number
	Address of		Doing business as Plant With Purpose	<i>(</i>);		33-0052976
	Name cha	•		m/suite	E l elep	bhone number
	Initial retu		4747 Morena Blv Suite 100			858-274-3718
		n/terminated	City or town, state or province, country, and ZIP or foreign postal code		• •	
Ц	Amended		San Diego, CA, 92117			s receipts \$ 4,857,153
	Applicatio	on pending	F Name and address of principal officer: Scott Sabin		•	for subordinates? Yes Vo
	-		4747 Morena Blv Suite 100, San Diego, CA 92117			tes included? Yes No see instructions)
<u> </u>	-	npt status:	✓ 501(c)(3)	-	,	,
J			www.plantwithpurpose.org/	H(c) Group ex		
ĸ			Corporation ☐ Trust ☐ Association ☐ Other ► L Year of formation	n: 1984	M State	e of legal domicile: CA
P	art I	Summa	•			
			cribe the organization's mission or most significant activities: Plant Wit			
Activities & Governance			on that transforms lives in rural areas around the world where poverty and	environmenta	l degra	adation intersect. We
nar			I on Schedule O, Statement 1)			
ver			box \blacktriangleright if the organization discontinued its operations or disposed o	f more than 2	25% o	f its net assets.
ဗိ			voting members of the governing body (Part VI, line 1a)		3	12
<u>م</u>	4	Number of	independent voting members of the governing body (Part VI, line 1b)		4	11
tie	5	Total numb	per of individuals employed in calendar year 2019 (Part V, line 2a) .		5	22
ť	6	Total numb	per of volunteers (estimate if necessary)		6	24
Ac	7a ⁻	Total unrel	ated business revenue from Part VIII, column (C), line 12		7a	0
	b	Net unrelat	ted business taxable income from Form 990-T, line 39		7b	0
				Prior Year		Current Year
ø	8	Contributio	ons and grants (Part VIII, line 1h)..............	5,5	46,886	4,832,566
Revenue	9	Program s	ervice revenue (Part VIII, line 2g)		0	
eve	10	Investmen	t income (Part VIII, column (A), lines 3, 4, and 7d)		20,854	23,192
ũ			nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		. 0	
			ue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,5	67,740	4,855,758
			d similar amounts paid (Part IX, column (A), lines 1–3)		60,267	2,881,198
			aid to or for members (Part IX, column (A), line 4)		0	
s	·		her compensation, employee benefits (Part IX, column (A), lines 5-10)	1.7	08,477	1,967,445
Expenses	16a		al fundraising fees (Part IX, column (A), line 11e)		0	
per	b		raising expenses (Part IX, column (D), line 25) ► 645,162			
й	17		enses (Part IX, column (A), lines 11a–11d, 11f–24e)	5	40,295	481,992
			nses. Add lines 13–17 (must equal Part IX, column (A), line 25)		09,039	
			ess expenses. Subtract line 18 from line 12		58,701	
r sa	3			ginning of Curre		
Net Assets or Fund Balances	20	Total asset	ts (Part X, line 16)		46,862	
Ass I Bal	21		ties (Part X, line 26)		20,504	
Net	22		or fund balances. Subtract line 21 from line 20		26,358	
	art II		re Block	5,1	20,000	4,001,004
_			, I declare that I have examined this return, including accompanying schedules and statem	ents and to the	hest of	my knowledge and belief it is
	ie, correct,		eparer (other than officer) is based on all information of which preparer h			
			H.A.		1/20	/2021
Sig	an	Sig	N % = !	Date	/1/20	
He		Sco	ott Sabin, Chief Executive Officer			
		D —	r print name and title			
D		· · · ·	preparer's name Preparer's signature Date		Chaoli	L :r PTIN
Pa					Check self-em	
	eparer			!-		
Us	se Only	Firm's nar				
Ma	iv the ID	Firm's add	this return with the preparer shown above? (see instructions)	Phone	110.	Yes . No
_	-				• •	YesNo Form 990 (2019)
101	raperw	ork Reduct	ion Act Notice, see the separate instructions. Cat. No	. 11282Y		Form 330 (2019)

rm 99	90 (2019) Page
art	
4	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	(Continued on Schedule O, Statement 2) Did the organization undertake any significant program services during the year which were not listed on the
2	prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
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 othe the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 625,258 including grants of \$ 529,015) (Revenue \$ 431,415)
	HAITI - Plant With Purpose Haiti continues to empower farming families to restore severely degraded land through sustainable farming techniques and reforestation. 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 \$ 611,968 including grants of \$ 528,107) (Revenue \$ 524,660)
	DOMINICAN REPUBLIC - In fiscal year 2020, partnering families in the Dominican Republic planted over 1.3 million trees. While the border region between the Dominican Republic and Haiti still holds one of the highest poverty rates in the Caribbean, Plant
	With Purpose communities are transforming their land and their lives. Our team leaders in the Dominican Republic recognize the
	importance of empowering the next generation and partnered with local schools this past year to engage the youth in conservation
	efforts. Encouraging scientific inquiry, the team performs basic participatory biodiversity assessments with local schools,
	encouraging the youth to understand and take ownership of the land around them.
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$ 256,906)
	TANZANIA - Plant With Purpose Tanzania families are planting over 10 times the number of trees that nonpartnering families plant,
	and benefitting from 38 percent higher crop yields. In the past 15 years, partnering families have planted over 12 million trees,
	which are healing streams and increasing water availability in their communities. Through 245 church partnerships and a
	Bible-based curriculum called Redemptive Agriculture, we are truly seeing transformation take root. As partnering farmers and staff members face the threat of COVID-19, they turn to God for comfort and strength. Country Director Richard Mhina shares:
	"The good news is that there is hope in trusting God, Creator of Heaven and Earth (John 16:33, John 14:2)."
4d	Other program services (Describe on Schedule O.) See Schedule O, Statement 3
	(Expenses \$ 2,450,015 including grants of \$ 1,370,076) (Revenue \$ 1,063,895)
4e	Total program service expenses ► 4,218,460

	0 (2019)		F	Page 3
Part	V Checklist of Required Schedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		res	
	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		~
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		r
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		r
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		r
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 donor-restricted endowments or in 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		r
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		~
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		~
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f		r
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	~	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If</i> "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		r
13 14e	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> Did the organization maintain an office, employees, or agents outside of the United States?	13		~ ~
14a b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	14a		
D	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? If "Yes," complete Schedule F, Parts III and IV.	16		~
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	17		~
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <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? If "Yes," complete Schedule G, Part III	19		~
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
b	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		~

Form 990 (2019)

Test No. 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part X, column (A), line 27.11 "Yes," complete Schedule I, Parts I and III 2 2 23 Did the organization answer "Yes" to Part VIII, Section A, line 3.4, or 5 about compensation of the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$10,000 as of the last day of the year, that was issued after December 31, 20027 II "Yes," answer mes 24b through 24d and complete Schedule K. II "No," go to fine 25a 24a 24a <th>Part</th> <th>Checklist of Required Schedules (continued)</th> <th></th> <th></th> <th></th>	Part	Checklist of Required Schedules (continued)			
Part IX, column (A), line 2? If "Yes," complete Schedule J, Parts I and III 22 V 23 Did the organization asser "Yes" to Dart VII, Section A, line 3, 4, or 5 about compensation of the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$10,000 as of the list dray of the year, if was issued after December 31, 2002? If "Yes," comprete Schedule K. If "No," go to line 256 244 V 240 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 246 246 250 Bott the organization invest any proceeds of tax-exempt bonds outstanding at any time during the year? 246 246 251 Bott the organization acts as in "on behaf of" issue for bonds outstanding at any time during the year? 246 253 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization repays any discredue L, Part I 256 2 250 Did the organization actual may anound on they X, line 5 or 22, for receivables from or paysibles to any current or former officer, director, trustee, key employee, creator or founder, austantial contributor or 35% controlled entry or tamily member of any of these persons? If "Yes," complete Schedule L, Part I 26 2 27 Did the organization actual was diversed may an except beach organization encept any anound on these persons? If "Yes," complete Schedule L, Part I 26 2 27 Did the organization actual wase any tamine			-	Yes	No
organization's current and former officers, directors, trustees, key employees, and highest compensated employees if <i>W</i> 'res, "complete Schedule <i>J</i> , and <i>W</i> was issued after December 31, 2022 <i>II W</i> 'res, "conswer lines 240 24a Did the organization nave a tax-exempt bond sisue with an outstanding principal amount of more than \$100,000 as of the list day of the year, <i>H</i> was issued after December 31, 2022 <i>II W</i> 'res, "more Within State Add Complete Schedule <i>K</i> . <i>H W</i> \ordsymbol <i>T W</i> be <i>T i the organization mater any proceeds of tax-exempt bonds beyond a temporary period exception?</i> . 24d 24d b Did the organization maintain an escrow account other than a refunding escrow at any time during the year? 24d 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(2) organizations. Dd the organization age in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported an any of the organization sp 500 or 500-c?? 25d 2 25a Did the organization accuration than on the person or payables to any current of former officer, director, trustee, key employee, creator or forunder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>H Y</i> 'res, <i>"complete Schedule L, Part II</i> 2 2 27 Did the organization approxeming to accurate the following parties (see Schedule L, Part I) 2 2 2 27 Did the organization accurate than that that transaction with one of the following parties (see Schedule L, Part I) 2 2 2 <td< th=""><th>22</th><th></th><th>22</th><th></th><th>~</th></td<>	22		22		~
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 issue dare Docember 31, 2002? If "Yes," answer lines 24b 24a ✓ 24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24a ✓ 24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year? 24c 24c 25a Bection 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!? 25c 24d 25a Did the organization account as an "on behalf of "lssuer for bonds outstanding at any time during the year? 25c 26c 25a Did the organization account as an "on behalf of "lssuer for bonds outstanding at any time during the year? 25c 2c 25a Did the organization account any account on Part X, line 5 or 22, for coclusibles from or psyables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 355 controlled antity or applicable flig thresholds, conditions, and exceptions): 27 ✓ 27 Did the organization aparty to a busiless transaction with one of the following parties (see Schedule L, Part I) 2c ✓ 27 V instructions, for applicable fling thresholds, conditions, and exceptions):<	23	organization's current and former officers, directors, trustees, key employees, and highest compensated	23		~
b Did the organization mixest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escow account other than a refunding escrow at any time during the year? 34c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 34c 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 and not been reported on any of the organization end that transaction has not been reported on any of the organization end your that it engaged in an excess benefit transaction or the adjust on the adjust on the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any ourrent or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 27 Did the organization area as the basiness transaction with one of the following parties (see Schedule L, Part II 28 V 29 Did the organization area as the abusiness transaction with one of the following parties (see Schedule L, Part II 29 V 20 Did the organization area or any of these persons? If "Yes," complete Schedule L, Part II 28 A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 29 Did the organization areactor trustee, key employee, creator or founder, ore	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? <i>If "Yes," answer lines 24b</i>			
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year 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? 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? 25b 2 260 Did the organization apport any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustes, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part I 26 ✓ 27 Did the organization sparts to a business transaction with one of the following parties (see Schedule L, Part II 26 ✓ 28 Was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part II 27 ✓ 29 Did the organization aparty to a business transaction with one of ther sinitar assets, or qualified creaser or any complete Schedule L, Part II 28a ✓ 29 Did the organization receive more than 255,000 in non-cash contributors? If "Yes," complete Schedule L, Part II 28a ✓ 30 Did the organization receive m	b				
d Did the organization acta 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-E7? 250 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity, or thanily member of any of these persons? If 'Yes,'' complete Schedule L, Part I 26 27 Did the organization report day amount on Part X, line 5 or 22, for neceivables from or payables to any current or form of foure, director, trustee, key employee, creator or founder, substantial contributor, or any the segments of any of these persons? If 'Yes,'' complete Schedule L, Part II 27 28 Was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV 28a 2 29 Did the organization repert individual described in line 28a? If 'Yes,'' complete Schedule L, Part IV 28b 2 2 29 Did the organization reperts or thistorical treasures, or other simitar assets, or qualified conservation combinat		Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
transaction with a disqualified person during the yea? (Ir "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 990-627 1/2 25b V 25b V 26b V 25b V 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity (including an employee thereof) or agrant yealection committee member, or to a 35% controlled entity (including an employee thereof) or agrant yealection committee member, or to a 35% controlled entity (including an employee thereof) or agrant yealection committee member, or to a 35% controlled entity (including an employee thereof) or agrant yealection committee member, or to a 35% controlled entity (including an employee, creator or founder, or substantial contributor? If 'Yes," complete Schedule L, Part II 28 Was the organization agrant or obtenes instanction with one of the following parties (see Schedule L) 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes," complete Schedule L, Part IV 29 Did the organization receive contributions of at, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes," complete Schedule L, Part II 30 U Y 31 Did the organiz	d		24d		
year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part I 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of any of these persons? If "Yes," complete Schedule L, Part II 28 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part II 28 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part II 28 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV 28 4 A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28 4 A family member or any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28 4 A six complete Schedule L, Part IV 28 4 Did the organization seely contributions? If "Yes," complete Schedule M, Part I 30 30 Did the organization seely exchange, dispose of, or transfer more than 25% of its net asse	25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		~
or forme ⁻ officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26 ✓ 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributors or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee, thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III. 27 ✓ 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV. 28a ✓ 29 A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV. 28a ✓ 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part II 28c ✓ 30 Did the organization receive contributions of at, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part II 30 ✓ 31 Did the organization releave controluctions? If "Yes," complete Schedule N, Part II 31 ✓ 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 ✓ 33	b	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	25b		~
employee_creator or founder_substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	26	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	26		~
W instructions, for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I Did the organization inpudde, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-37 If "Yes," complete Schedule R, Part I, III, or N, and Part V, line 1 Did the organization neated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or N, and Part V, line 1 Did the organization. Exclusions 512(b)(13) If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization. Complete Schedule R, Part V, line 2 Texes" to line 35a, did the organization make any transfers to an exempt non-charitable related organization. So fits activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V in a 1<	27	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these	27		~
"Yes," complete Schedule L, Part IV 28a ✓ b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b ✓ c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a r 28b? 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? If "Yes," complete Schedule M, Part I 30 ✓ 31 ✓ 31 ✓ 32 Did the organization neceive contributions of the similar assets, or qualified conservation contributions? If "Yes," complete Schedule M, Part I 31 ✓ 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 ✓ 33 Did the organization routon 00% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1 33 ✓ 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? 35a ✓ 35a Did the organization. Sold the organization make any transfers t	28				
c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV 28c v 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 v 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualifed conservation contributions? If "Yes," complete Schedule M 30 v 31 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualifed conservation contributions? If "Yes," complete Schedule M, Part I 31 v 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule R, Part II. 31 v 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I. 33 v 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? 35a v 35a Did the organizations. Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? 35b v 35a Did the organization complete Schedule R, Part V, line 2 36 v 36 v </th <th>а</th> <th>"Yes," complete Schedule L, Part IV</th> <th></th> <th></th> <th>~</th>	а	"Yes," complete Schedule L, Part IV			~
"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? If "Yes," complete Schedule M 30 ✓ 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 ✓ 32 Did the organization osell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 31 ✓ 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I. 33 ✓ 34 Was the organization nelated 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 organizations. Did the organization make any transfers to an exempt non-charitable related organizations. Did the organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 35b ✓ 35a 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. 37 <th>b</th> <th></th> <th>28b</th> <th>~</th> <th></th>	b		28b	~	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 \$2 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 \$2 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 \$2 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-3? If "Yes," complete Schedule R, Part I 33 \$2 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 \$2 \$35 \$2 \$2 35a Did 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 \$2 \$35 \$2 \$2 \$35 \$2 \$2 \$35 \$2 \$3 \$2 \$2 \$3 \$3 \$2 \$2 \$2 \$3 \$3 \$2 \$3 \$3 \$2 \$3 \$3 \$2 \$3 \$3 \$2 \$3 \$3 \$2 \$3 \$3 \$2 \$3		"Yes," complete Schedule L, Part IV			~
conservation contributions? If "Yes," complete Schedule M 30 ✓ 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 ✓ 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 32 ✓ 33 Did the organization nealt, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 32 ✓ 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I. 33 ✓ 35a Did the organization neated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part V, line 1 34 ✓ 35a Did the organization nave a controlled entity within the meaning of section 512(b)(13)? ✓ 35a ✓ 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization complete Schedule R, Part V, line 2 35b ✓ 37 Did the organization complete Schedule C ond provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O. 37 38 ✓ 38 ✓ Statements Regarding Other IRS Filings and Tax Compliacce 1a 0			29	~	<u> </u>
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? If "Yes," complete Schedule R, Part I 33 ✓ 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a ✓ 35a Did the organization. Note a controlled entity within the meaning of section 512(b)(13)? 35a ✓ 36 F"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 complete Schedule R, Part V, line 2 36 ✓ 37 Did the organization complete Schedule R, Part V, line 2 36 ✓ 37 Did the organization complete Schedule Q and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O. 37 ✓ 38	30		20		
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 v 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 v 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 v 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a v 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI ines 1 37 v 38 Did the organization complete Schedule O. Part V Statements Regarding Other IRS Filings and Tax Compliance 38 v 37 Ita enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0 1b 0 38 V Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1a 1a 0 1b 0	31				~
 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>		Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			~
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 35a ✓ 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI and the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O. 38 ✓ Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Ia 0 1a 0 1b 0 0 1b 0 b Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0 1b 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1a 0 1b 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable </td <td>33</td> <td>Did the organization own 100% of an entity disregarded as separate from the organization under Regulations</td> <td></td> <td></td> <td>~</td>	33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			~
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? If "Yes," complete Schedule R, Part VI 37 ✓ 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O. 38 ✓ Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Ia 0 1a 0 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	34	or IV, and Part V, line 1	34	~	
controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35a		35a	~	<u> </u>
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? If "Yes," complete Schedule R, Part VI 37	b		054		
 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O. 38 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable		~	~
 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O. 38 ✓ Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V	37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V	38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		~	
1a Ia 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Ib 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Part	V Statements Regarding Other IRS Filings and Tax Compliance			
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable				Yes	No
reportable gaming (gambling) winnings to prize winners?		Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
	С		_		
Elititi Siste (2004)		reportable garning (gambling) winnings to prize winners?		-	(2019)

Statements Regarding Other IRS Filings and Tax Compliance (continued) Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Zel 22 Zel Zel <th>Form 99</th> <th>D (2019)</th> <th></th> <th>I</th> <th>Page 5</th>	Form 99	D (2019)		I	Page 5
2a 2a 2b 2b 2c 2c <t< th=""><th>Part</th><th>Statements Regarding Other IRS Filings and Tax Compliance (continued)</th><th></th><th></th><th></th></t<>	Part	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
Statements, filed for the calendar year ending with or within the year covered by this return? 22 22 Note: If the sum of lines 2, and the organization file a lequired federal emptyment tax returns? 23 24 30 Did the organization have unrelated builess gross income of 51,000 or more during the year? 36 24 41 Yes, " has it filed a Form 990-T for this year? If "No" to line 30, provide an explanation on Schedule 0 36 44 At any time during the calendar year, did the organization have an interest in, or a signature or other authority year, a financial account; a foreign country year is a to hark account, a control is atomatical account; or the financial account; a foreign dimension is a bark account, securities account, or other financial account; a foreign dimension is a bark account, securities account, or other financial account; a foreign dimension of financial constructions for film greenginements of Financial Accounts (FBAR). 56 Max at the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible on thrbutions that were not tax deductible accontributions or great did the organization notify the doner of the value of the goods a contribution and parity for goods and services provided to the payor? 70 7 Organization receive a payment in excess of \$70 may frame another to maximity for goods and services provided to the payor? 70 7 Organization selectuation notify the doner of the value of the goods as contribution and partiy for which it was required to life. Form 32			_	Yes	No
b If at least one is reported on line 2a, did the organization file all required foderal employment tax returns? 2b v 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a v 3b If "Yes," has it filed a Form 390-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i> . 3a v 3b If "Yes," has it filed a Form 390-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i> . 3a v 3b If "Yes," has it filed a Form 390-T for this year? <i>If "No" to line 3b, provide an explanation or other authorty over</i> , a financial account in a foreign country business gross is a bank account, securities account, or other financial Accounts (FBAR). 5a v 5b Was the organization neary to a prohibited tax shelter transaction at any time during the tax year? 5a v 5c If "Yes," did the organization file orm 3886-17? 5c 5c 5c 5c Does the organization neary to eary prohibited tax shelter transaction at any taxable party to a prohibitot fax shelter transaction at any tax back contributions and party for geodes and services provided to the payor? 5c 5c </td <td>2a</td> <td>Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax</td> <td></td> <td></td> <td></td>	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		Statements, filed for the calendar year ending with or within the year covered by this return 2a 22			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a ✓ b If "Yes," has if filed a Form 90-T for this year? If "No" to line 3b, provide an explanation on Schedule 0 3b Image: Schedule 0 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? 4a ✓ b If "Yes," enter the name of the foreign country 0 Schedule 0 5a ✓ See instructions for fling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a ✓ b Did any taxable party notify the organization file form 386-72 5b ✓ c If "Yes," did the organization nature were not tax deductible as charitable contributions? 5b ✓ c Organization studie any contributions that were not tax deductible as charitable contribution and partly for goods and services provided to the payo? 7b ✓ d If "Yes," did the organization netwere were solication an express statement that such contributions? 7b ✓ d If "Yes," did the organization netwere were solication for organization service were solication forganization service were solication forganization service were so	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
b if "Yes," has it filed a Form 990-T for this yea? // "No" to line 3b, provide an explanation on Schedule 0. 3b if a At any time during the calendary year, did the organization have an interest in, or a signature or other suborty over, a financial account; end the toreign country (such as a bank account, securities account, or other financial accounts (FBAR). if "Yes," enter the name of the foreign country is prohibited tax shelter transaction at any time during the cale of the organization that it was or is a party to a prohibited tax shelter transaction? 5a v if Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization note wave any there yro solicitation an express statement that such contributions or grifts were not tax deductible? 6b v if "Yes," indicate the number of Forms 8282 filed during the eyro solicitation and party for goods and services provided to the payor? 7a v it if "Yes," indicate the number of Forms 8282 filed during the year rd rd rd if "Yes," indicate the number of Forms 8282 filed during the year rd rd rd it the organization needly the disclose of the value of the goods or services provided? rd rd rd if "Yes," indicate the number of Forms 8282 filed during the year rd		Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
4a A any time during the calendar year, did the organization have an interest in, or a signature or other authonity over, a financial account if; 4a ✓ b H "Yea," enter the name of the foreign country > See instructions for Illing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a ✓ b Was the organization aparty to a prohibited tax shelts runsaction at any time during the tax year? 5b ✓ c 16 Yean See instructions for Image requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a ✓ c 16 Yean See instructions for Amage requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a ✓ c 16 Yean See is a struction solicit any contributions fant were not tax deductible? See is a structions? See See </td <td>3a</td> <td>Did the organization have unrelated business gross income of \$1,000 or more during the year?</td> <td>3a</td> <td></td> <td>~</td>	3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
a financial account; in a foreign country (such as bank account, securities account, or other financial account)? b If 'Yes, 'enter the amount of the foreign country \ See instructions for filing requirements for FInCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR); b Did any taxable party notify the organization fait was shefter transaction; a any time during the tax year? b Did any taxable party notify the organization fait was or is a part to a prohibide tax shefter transaction? c If 'Yes,' to line 5 aor 5b, did the organization fait was or is a part to a prohibide tax shefter transaction? c If 'Yes,' to line 5 aor 5b, did the organization fait was or is a part to a prohibide tax shefter transaction? c If 'Yes,'' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive advuctible contributions under section 170(c). 1 If 'Yes,'' did the organization notify the donor of the value of the goods or services provided? 7 To ' C Did the organization receive a payment in excess of 575 made party, as a contribution and party for goods and services provided to the payor? 1 Did the organization receive a pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7 To ' 7 Did the organization receive a pay premiums, directly or indirectly, on a personal benefit contract? 7 To ' 7 To ' 7 Did the organization receive a pay premiums, directly or indirectly, on a presonal benefit contract? 7 To ' 7 Jo ' 7 Did the organization maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. Did a donor advised f	b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
a financial account; in a foreign country (such as bank account, securities account, or other financial account;? 43 44 4 4 4 4 4 4 4 4 4 4	4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
b If "Yes," enter the name of the foreign county > See instructions for fling requirements for FICEN Form 114, Report of Foreign Bark and Financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any taxable party notify the organization file form 886-17? 5c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization native erron tax deductibles achitable contributions? 5c Torganization share annual gross receipts that are normally greater than \$100,000, and did the organization niclude with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organization share any receive deductible contributions under section 170(c). 0 Did the organization notify the donor of the value of the goods or services provided? 7 To 0 Did the organization necleve any funct, directly or indirectly, to a personal benefit contract? 7 If "Yes," indicate the number of Forms 8282 field during the year Tol 7 V 10 the organization cevieve any funct, divertly, to pay premiums on a personal benefit contract? Tol 7 If "Yes," indicate the number of Forms 8282 field during the year? Tol 10 the organization sell, exchang, any premiums, dincerity, on			4a		~
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax shelter transaction? 5a ✓ b Did any taxable party notify the organization file form 8886-17 5b ✓ 6b Desc the organization have annual gross receipts that are normally greater than \$100,000, and did the organization notude with every solicitation an express statement that such contributions? 6a ✓ 7b Organization receive a payment in excess of \$75 made party as contribution and party for goods and services provided? 7a ✓ 7 Organization receive a payment in excess of \$75 made party as contribution and party for goods and services provided? 7a ✓ 7 Did the organization notify the donor of the value of the goods or services provided? 7a ✓ 7 Did the organization celve any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7d ✓ 7 Did the organization neaves as business holdings at any time during the year? 7d ✓ 8 Sponsoring organization make any taxable distributions under section 4966? 9a 9b 9 Sponsoring organization make any taxable distributions under section 4966? 9a 9b 9 Section 501(c)(12 organizations. Enter: 10a 10a 10a <td>b</td> <td></td> <td></td> <td></td> <td></td>	b				
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax shelter transaction? 5a ✓ b Did any taxable party notify the organization file form 8886-17 5b ✓ 6b Desc the organization have annual gross receipts that are normally greater than \$100,000, and did the organization notude with every solicitation an express statement that such contributions? 6a ✓ 7b Organization receive a payment in excess of \$75 made party as contribution and party for goods and services provided? 7a ✓ 7 Organization receive a payment in excess of \$75 made party as contribution and party for goods and services provided? 7a ✓ 7 Did the organization notify the donor of the value of the goods or services provided? 7a ✓ 7 Did the organization celve any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7d ✓ 7 Did the organization neaves as business holdings at any time during the year? 7d ✓ 8 Sponsoring organization make any taxable distributions under section 4966? 9a 9b 9 Sponsoring organization make any taxable distributions under section 4966? 9a 9b 9 Section 501(c)(12 organizations. Enter: 10a 10a 10a <td></td> <td>See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).</td> <td></td> <td></td> <td></td>		See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b ✓ c ff "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 5c 5c a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as chartable contributions? 5c	5a		5a		~
c If "Yes" to line 5a or 5b, did the organization file Form 8866-T? 5c 6a Does the organization solicit any contributions that were not tax deductible as charitable contributions? 5c b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contribution and parts and the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 6b ✓ 7 Organization solicit any contributions that were not tax deductible as charitable contribution and partly for goods and services provided? 7a ✓ b If Yes," did the organization notify the donor of the value of the goods or services provided? 7b ✓ b If Yes," findicat the number of Forms 8282 field during the year 7d ✓ f If Yes," indicat the number of Forms 8282 field during the year 7d ✓ f If the organization receive a contribution of qualified inflaticatul property, or the reliced field contract? 7f ✓ f If the organization received a contribution of cast, bacts, ariplanes, or other vehicles, did the organization field contract? 7f ✓ f If the organization receive any taxable distributions under section 4966? 9a 9b gonosoring organizat			5b		~
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 ✓ bf "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b ✓ 7 Organization such events and yreceive deductible contributions under section 170(c). a contribution and partly for goods and services provided to the payor? 7a ✓ bl f Yes," indicate the number of Forms 8282 filed during the year Td ✓ 7b ✓ c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e ✓ d If "Yes," indicate the number of Forms 8282 filed during the year Td ✓ 7f ✓ d If the organization receive a ontribution of qualified intellectual property, did the organization freewed a contribution of cars, boats, ariphanes, or other vehicles, did the organization file of the sponsoring organizations maintaining donor advised funds. 7d ✓ 8 Sponsoring organization make any taxable distributions under section 4966? 9a 9b 9a 10 the sponsoring organization make any taxable distributions under section 4966? 9a 9b 9a 11 the organization neoveed a contributions included on Part VIII, line 12	с		5c		
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 adeductible contributions under section 170(c). 0 10 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 ✓ c Did the organization notify the donor of the value of the goods or services provided? 7c ✓ d If "Yes," indicate the number of Forms 8282 filed during the year 7d ✓ d If "Yes," indicate the number of Forms 8282 filed during the year 7d ✓ f If the organization receive any funds, directly or indirectly, on a personal benefit contract? 7ft ✓ f If the organization mate ad antibution of qualified intellectual property (dit the organization file Form 8282 arequired? 7d ✓ f If the organization neeves as business holdings at any time during the year? 7d ✓ 7d ✓ grass income form mem	-				
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b V 7 Organizations that may receive deductible contributions under section 170(c). a) b) d) a) 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 V c) Did the organization notify the donor of the value of the goods or services provided? 7b V c) Did the organization notify the donor of the value of the goods or services provided? 7c V d) f "Yes," indicate the number of Forms 8282 filed during the year 7d 7c V d) If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c V g) If the organization received a contribution of cas, boats, airplanes, or other vehicles, did the organization file a Form 108e-C 7n V g) If the sponsoring organization make any taxable distributions under section 4966? 9a 9a 9a g) Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 5 5 10 the sponsoring organization make a distribution suc	ou		6a	~	
gifts were not tax deductible? 6b ✓ 7 Organizations that may receive deductible contributions under section 70(c). 6b ✓ a 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 fr "Ves;" did the organization notify the donor of the value of the goods or services provided? 7a ✓ c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c ✓ d fr "Ves;" indicate the number of Forms 8282 filed during the year [7d] ✓ f Did the organization receive a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7t ✓ f It de organization nake avaitable distributions under section 4966? 9a 9a 9a 9 Sponsoring organization make avaitable distributions under section 4966? 9a 9a 9a 10 the sponsoring organizations make avaitable distributions under section 4966? 9a 9a<	h				
7 Organizations that may receive deductible contributions under section 170(c). a 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 v b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b v c Did the organization notify the donor of the value of the goods or services provided? 7c v c Did the organization notify the donor of the value of the goods or services provided? 7c v d If "Yes," indicate the number of Forms 282? indicate the organization receive any funds, directly or indirectly, on a personal benefit contract? 7f v f Did the organization receive any funds, directly or indirectly, on a personal benefit contract? 7f v f If the organization receive any output of cas, basia pinales, or other vehicles, did the organization file a form 108-c? 7h v 8 Sponsoring organizations maintaining donor advised funds. Did athe sponsoring organization make any taxable distributions under section 4966? 9a 9a g lid the sponsoring organizations. Enter: a 10a 10a 10a 10a list section 501(c)(7) organizations. Enter: 10a 10a 11a			6b	~	
a 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 7 b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b 7 c Did the organization call, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c 7c 7c d If "Yes," indicate the number of Forms 8282 filed during the year [7d] 7c 7c 7 f Did the organization calves any funds, directly or indirectly, or pay premiums on a personal benefit contract? 7e 7f 7 f If the organization receive a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7h ✓ f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7h ✓ g Sponsoring organization make and stribution to a donor, donor advised fund maintained by the sponsoring organization make a distribution to a donor, donor advised fund maintained by the sponsoring organization make a distribution to a donor, donor advised run full 9a 9a 9a Did the sponsoring organization make a distribution to a donor, donor advised run full 10a	7				
and services provided to the payor? 7a v b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7a v c Did the organization notify the donor of the value of the goods or services provided? 7a v c Did the organization notify the donor of the value of the goods or services provided? 7b v d If "Yes," indicate the number of Form 8282? If and the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c v d If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7f v f If the organization received a contribution of cars, boats, aiplanes, or other vehicles, did the organization file a Form 1098-C? 7h v 8 Sponsoring organizations maintaining donor advised funds. 10 a donor advised funds. 9a 9a 9 Did the sponsoring organization make a distribution to a donor, donor adviser or parks and the sponsoring organizations. Enter: 10a 10a 10a 10a 11 Section 501(c)(12 organizations. Enter: 10a 10b 11a 10a 10a 10a 10a 10a 10a 10b					
b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b V c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c V d If "Yes," indicate the number of Forms 8282 filed during the year 7d V d If "Yes," indicate the number of Forms 8282 filed during the year 7d V e Did the organization receive any funds, directly or indirectly, to pay premiums on exponal benefit contract? 7f V f Did the organization cover a contribution of qualified intellectual property, did the organization file a Form 1098-C? 7h V 8 Sponsoring organizations maintaining donor advised funds. 7h V 9 Sponsoring organizations maintaining donor advised funds. 9a 9a 10 the sponsoring organizations maintaining donor advised funds. 9a 9b 9a 10 the sponsoring organizations. Enter: 10a 10b 10b 10b 10b 10a 10b 10b 10a 10b 10b 10a 10b 10a 10b 10a 10a 10b 10a 10b 10a	u		7a	~	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c 7c d If "Yes," indicate the number of Forms 8282 filed during the year 7d 7e 7e d If "Yes," indicate the number of Forms 8282 filed during the year 7d 7e 7e 7e d If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7f 7e 7f 7e 7f	b				
required to file Form 8282? 7c ✓ d If "Yes," indicate the number of Forms 8282 filed during the year 7d ✓ e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7f ✓ g If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? 7g ✓ 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966? 8a 9 Sponsoring organizations make any taxable distributions under section 4966? 9a 9b 10 Section 501(c)(7) organizations. Enter: 10a 10b 10b 11 Section 501(c)(12) organizations. Enter: 10a 10b 10b 11b 12 Section 501(c)(12) organizations. Enter: 10a 10b 10b 11b 12a 11 Section 501(c)(12) organizations. Enter: 10a 10b 10b 11b 12a 12 Gross income from members or shareholders 11a 12b 12a				-	
d If "Yes," indicate the number of Forms 8282 filed during the year 7d e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e ✓ f Did the organization received a contribution of qualified intellectual property, did the organization file a Form 108-C? 7g ✓ g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 108-C? 7n ✓ g Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make a adistibution to a donor, donor advised, or related person? 8 9 Sponsoring organizations maintaining donor advised funds. 9a 9a a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: 10a 9a a Initiation fees and capital contributions included on Part VIII, line 12 10a 10a 11 Section 501(c)(12) organizations. Enter: 10b 11a 12a a Gross income from members or shareholders 11b 12a 12a 12 Section 501(c)(12) organizations. Enter: 12b 12a 12a </td <td>Ŭ</td> <td></td> <td>7c</td> <td></td> <td>~</td>	Ŭ		7c		~
 bid the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization files Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization files form 1098-C? Sponsoring organization maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make any taxable distributions under section 4966? Bection 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Ine 12. Gross income from deptal contributions included on Part VIII, line 12 Ine 2. Initiation fees and capital contributions included on Part VIII, line 12 Ing agriast amounts due or received from them.) Section 501(c)(12) organizations. Enter: Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? 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? 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? Is the organization and file Form 4720, Schedule N. Is the organization and file fo	Ь				-
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? 7h ✓ 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 organization maintaining donor advised funds. Did the organization and maintaining donor advised funds. 9a 9 Sponsoring organization make any taxable distributions under section 4966? 9a 9a b Did the sponsoring organizations maintaining donor advised funds. 9a 9b 9b 10 Section 501(c)(7) organizations. Enter: 10a 10b 10b 10a 11 Section 501(c)(12) organizations. Enter: 10a 10b 11a 12a 12 Section 501(c)(12) organizations. Enter: 11b 12a 12a 12a 13 Section 501(c)(12) organizations. Enter: 11b 12a			7e		~
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 make any taxable distributions under section 4966? 8 9 Sponsoring organizations maintaining donor advised funds. 9a 9a b Did the sponsoring organization make any taxable distributions under section 4966? 9a 9a 9 Did the sponsoring organizations. Enter: 10a 10a 10b 1 Section 501(c)(12) organizations. Enter: 10a 11b 12a 1 Section 501(c)(12) organizations. Enter: 11a 11b 12a 2 Section 501(c)(12) organizations. Enter: 11a 12a 12a 3 Section 501(c)(12) organizations. Enter: 11b 11b 12a 12a Section 501(c)(29) qualified nonprofit health insurance issuers. 11a 11b 12a 12a Section 501(c)(29) qualified nonprofit health plans in more than one state?					
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 funds. 8 8 9 Sponsoring organizations maintaining donor advised funds. 9a 9b 9b 0b					-
 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? Sponsoring organization maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders B Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 501(c)(2) and the amount of tax-exempt interest received or accrued during the year. Ita Ita<	-				-
 sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make any taxable distributions under section 4966? Bection 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Enter the amount of reserves the organization is required to maintain by the states in which the organization receive any payments for indoor tanning services during the tax year? Ita is the organization receive any payments for indoor tanning services during the tax year? Ita is the organization stree on hand If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O. 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? Ita is the organization an educational institution subject to the section 4968 excise tax on net investment income? 					-
9 Sponsoring organizations maintaining donor advised funds. 9a a Did the sponsoring organization make any taxable distributions under section 4966? 9a b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: 10a a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: 11a 11a a Gross income from members or shareholders 11a 11b 12a Section 501(c)(29) qualified nonprofit health rusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 13 Section 501(c)(29) qualified nonprofit health plans in more than one state? 13a 13 Section 501(c)(29) qualified health plans 13b 14 13b 13a 15 Enter the amount of reserves on hand 13c 14a 13b 13c 15 If "Yes," as it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O. 14a 16	0		8		
 a Did the sponsoring organization make any taxable distributions under section 4966?	9		- U		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: 10a 10a a Initiation fees and capital contributions included on Part VIII, line 12 10a 10b b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 10b 11 Section 501(c)(12) organizations. Enter: 10b 11a 10b a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 11a 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year . 12b 13a 3 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a 13a a Is the organization licensed to issue qualified health plans in more than one state? 13a 13a b Enter the amount of reserves the organization is required to maintain by the states in which the organization receive any payments for indoor tanning services during the tax year? 14a 14a b If			9a		
10 Section 501(c)(7) organizations. Enter: 10a 10a a Initiation fees and capital contributions included on Part VIII, line 12 10a 10b b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 10b 11 Section 501(c)(12) organizations. Enter: 10a 10b 10b a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11a 11b 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13a 3 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a 13a a Is the organization licensed to issue qualified health plans in more than one state? 13a 13a Note: See the instructions for additional information the organization must report on Schedule O. 13a 14a 14a b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O. 14b 14b 14b 14b 15 14a 14b <t< td=""><td></td><td></td><td></td><td></td><td></td></t<>					
 a Initiation fees and capital contributions included on Part VIII, line 12			0.5		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: 11a a Gross income from members or shareholders 11a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 12b 13a 13 Section 501(c)(29) qualified nonprofit health plans in more than one state? 13a 14 Note: See the instructions for additional information the organization must report on Schedule O. 13a 14 Did the organization is licensed to issue qualified health plans 13b 13c 14 Did the organization receive any payments for indoor tanning services during the tax year? 14a ✓ 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 ✓ 16 ✓ 15 Is the organization an educational institution subject to the section 4968 excise tax on net investment incomer 16 ✓					
11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders 11a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b 12a 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a 13a a Is the organization licensed to issue qualified health plans in more than one state? 13a 13a Note: See the instructions for additional information the organization must report on Schedule O. 13b 13a c Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a ✓ 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 ✓ 16 ✓ 15 15					
a Gross income from members or shareholders 11a 11a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b 12a 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 12b 13a a Is the organization licensed to issue qualified health plans in more than one state? 13a Note: See the instructions for additional information the organization must report on Schedule O. 13a c Enter the amount of reserves the organization is required to maintain by the states in which the organization receive any payments for indoor tanning services during the tax year? 14a 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a ✓ 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 ✓ 16 ✓					
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 12b 13a a Is the organization licensed to issue qualified health plans in more than one state? 13a Note: See the instructions for additional information the organization must report on Schedule O. 13a b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b c Enter the amount of reserves on hand 13c 14a 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a ✓ b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O. 14b 15 15 Is the organization and file Form 4720, Schedule N. 15 ✓ 16 ✓ 15 ✓					
against amounts due or received from them.) 111 <td< td=""><td>_</td><td></td><td></td><td></td><td></td></td<>	_				
 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	D				
 b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a		12a		
 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?			TZu		
 a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand d 13b 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>. 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? 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? 					
Note: See the instructions for additional information the organization must report on Schedule O. Image: the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Image: the image: the image: the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand Image: the organization receive any payments for indoor tanning services during the tax year? Image: the image: the organization receive any payments for indoor tanning services during the tax year? Image: the organization receive any payments for indoor tanning services during the tax year? Image: 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? Image: the organization and file Form 4720, Schedule N. 16 Image: the organization an educational institution subject to the section 4968 excise tax on net investment income? Image: the organization and the organization subject to the section 4968 excise tax on net investment income?			132		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b 13b c Enter the amount of reserves on hand 13c 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a 14a b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 15 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 ✓	a		104		
 the organization is licensed to issue qualified health plans Enter the amount of reserves on hand Enter the amount of reserves on hand If a Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>. 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? If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 	h				
 c Enter the amount of reserves on hand	D				
 14a Did the organization receive any payments for indoor tanning services during the tax year?	~				
 b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O. 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? 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? 			140		./
 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? 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 ✓ 					-
 excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 			140		
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?	15		15		
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 🖌			13		~
	16		16		
	10	If "Yes," complete Form 4720, Schedule O.	10		

Page 5

Form 99	90 (2019)		I	Page 6
Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.	See in	struc	tions.
	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>		~
Secti	on A. Governing Body and Management			
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 1 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.	2	Yes	No
Ь				
b 2	Enter the number of voting members included on line 1a, above, who are independent . 1b 1 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	-		
	any other officer, director, trustee, or key employee?	2		~
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? .	3		~
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		~
5 6	Did the organization become aware during the year of a significant diversion of the organization's assets? . Did the organization have members or stockholders?	5 6		レ レ
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		~
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		~
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	~	
b	Each committee with authority to act on behalf of the governing body?	8b	~	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses on Schedule O</i>	9		~
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reve	nue C	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 purposes?	10b		
11a b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990.	11a	~	
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 rise to conflicts?	12b	~	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	~	
13	Did the organization have a written whistleblower policy?	13	~	
14	Did the organization have a written document retention and destruction policy?	14	~	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	~	
b	Other officers or key employees of the organization	15b	~	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		~
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
0	organization's exempt status with respect to such arrangements?	16b		
Secti 17	on C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► See Schedule O, Statement 4			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ✓ Own website	-T (Sec	tion {	501(c)
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict and financial statements available to the public during the tax year.			olicy,
20	State the name, address, and telephone number of the person who possesses the organization's books and r Floresta USA Incorporated, (858)274-3718	ecords		

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

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

				((C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and title	Average					e than c is both		Reportable	Reportable	Estimated amount
	hours per week			dad		or/trust	tee)	compensation from the	compensation from related	of other compensation
	(list any	or o	Inst	Officer	Kej	emj	Former	organization	organizations	from the
	hours for related	lividu	lituti	cer	em	hest	mer	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
	organizations	Individual trustee or director	Institutional trustee		Key employee	ee on				related organizations
	below dotted line)	uste	tru		lee	lper				
		ĕ	stee			Highest compensated employee				
Scott Sabin	40.00									
President	0.00	~				~		138,118	0	0
John Mitchell	40.00									
Director of International Programs	0.00				~	~		113,412	0	0
John Steel	0.00									
Chair	0.00	~						0	0	0
Steve Dhanens	0.00									
Treasurer	0.00	~						0	0	0
Judy Enns	0.00	-								
Secretary	0.00	~						0	0	0
Ted Law	0.00	ļ								
Board Member	0.00	~						0	0	0
Eric Kaiser	0.00	-								
Board Member	0.00	~						0	0	0
Cathi Lundy	0.00	-								
Board Member	0.00	~						0	0	0
Darrell Shrader	0.00	-								
Board Member	0.00	~						0	0	0
Cindy Chen	0.00	-								
Board Member	0.00	~						0	0	0
Jeff Busby	0.00	-								
Board Member	0.00	~						0	0	0
Janet Farley	0.00	-								
Board Member	0.00	~						0	0	0
	+									
		1								
										- 000 (22.10)

Part	VII Section A. Officers, Directors, 1	rustees,	Key I	Em	plo	yee	s, an	d F	lighest Compe	nsated Emp	loyees	(contir	nued)
					•	C) sition							
	(A) Name and title	(B) Average hours	(do not check more than o box, unless person is both officer and a director/truste						(D) Reportable compensation	(E) Reportable compensatior	1	(F) nated am of other	
		per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MIS	C) orga	mpensati from the anization d organiz	and
			-										
			-										
			-										
			-										
			-										
			-										
			-										
			-										
	• • • • •												
1b c d	Subtotal	VII, Sectio			•	• •			251,530 251,530		0		0
2	Total number of individuals (including but reportable compensation from the organi	not limited					above	e) w		e than \$100,0	-		
3	Did the organization list any former of employee on line 1a? <i>If "Yes," complete s</i>	officer, dire						•	loyee, or highes	•		Yes	No V
4	For any individual listed on line 1a, is the organization and related organizations individual	greater th	an \$ ⁻	150,	000)? [f "Ye	s,"	complete Sched	dule J for su	ich		V
5	Did any person listed on line 1a receive of for services rendered to the organization?												V
	on B. Independent Contractors												
1	Complete this table for your five high compensation from the organization. Rep												
	(A) Name and business add	ress							(B) Description of serv	vices	(C Compe		
None													
2	Total number of independent contracto	ors (includii	ng bu	ıt n	ot	limit	ed to	 b th	ose listed abov	e) who			

received more than \$100,000 of compensation from the organization ►	received more than	\$100 000 of	compensation	from the	organization
	received more than	ψ100,000 OI	compensation		

0

Part VIII Statement of Revenue Check if Schedule O contain

Part	t VIII	Statement of Revenue Check if Schedule O contains a response or note to a	any line in this Pa	art VIII		
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts ts	1a	Federated campaigns 1a	0			
Contributions, Gifts, Grants and Other Similar Amounts	b		0			
n G	с	Fundraising events 1c 333,02	0			
ifts r A	d	Related organizations 1d	0			
, Gi nila	е	Government grants (contributions) 1e 281,82	3			
Sin	f	All other contributions, gifts, grants,				
utic		and similar amounts not included above 1f 4,217,72	3			
Oth	g	Noncash contributions included in				
ont			0			
āČ	h	Total. Add lines 1a–1f	4,832,566			
		Business Code				
Program Service Revenue	2a					
erv ue	b					
n S eni	С					
Jram Ser Revenue	d					
е Бо	е					
P	f	All other program service revenue				
	g	Total. Add lines 2a–2f				
	3	Investment income (including dividends, interest, and				
		other similar amounts)	23,192		0	0
	4	Income from investment of tax-exempt bond proceeds		_	0	0
	5	Royalties	• 0	0	0	0
	0	(i) Real (ii) Personal	_			
	6a	Gross rents 6a	_			
	b	Less: rental expenses 6b	_			
	C		0			
	d	Net rental income or (loss)	•			
	7a		_			
		sales of assets other than inventory 7a				
0	"		_			
venue	b	Less: cost or other basis and sales expenses . 7b				
			0			
Re		Net gain or (loss)	•			
Other Re		Gross income from fundraising				
đ	Ua	events (not including \$ 333,020				
		of contributions reported on line				
		1c). See Part IV, line 18 8a				
	b	Less: direct expenses 8b	_			
	c	Net income or (loss) from fundraising events	• 0		0	
	9a	Gross income from gaming				
		activities. See Part IV, line 19 . 9a				
	b	Less: direct expenses 9b				
	с	Net income or (loss) from gaming activities	•			
	10a	Gross sales of inventory, less				
		returns and allowances 10a 1,39	5			
	b	Less: cost of goods sold 10b 1,39	5			
	с	Net income or (loss) from sales of inventory	• 0	0	0	0
s		Business Code				
eor	11a					
an	b					
scellaneo Revenue	с					
Miscellaneous Revenue	d	All other revenue				
2	е	Total. Add lines 11a-11d				
	12	Total revenue. See instructions	4,855,758	23,192	0	0

	TIX Statement of Functional Expenses on 501(c)(3) and 501(c)(4) organizations must complete	ete all columns. All o	other organizations i	must complete colum	n (A).
	Check if Schedule O contains a response	or note to any line	in this Part IX .		[
	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0	0		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0	0		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	2,881,198	2,881,198		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0	0	51.404	
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	251,531	167,278	51,104	33,149
7	Other salaries and wages	1,372,553	745,707	253,172	373,674
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	91,686	50,428	17,420	23,838
9	Other employee benefits	139,786	74,285	29,222	36,279
10		111,889	61,541	21,258	29,090
11	Fees for services (nonemployees):	,	01/011	,	
a b	Management	33,691 0	14,055 0	18,497 0	1,139
c		30,000	0	30,000	(
d		0	0	0	(
e	Professional fundraising services. See Part IV, line 17	0	0	v	(
f	Investment management fees	0	0	0	
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	0	0	0	
12	Advertising and promotion	82,886	44,824	0	38,062
13	Office expenses	58,894	17,665	7,060	34,169
14	Information technology	22,178	8,274	2,969	10,935
15	Royalties	0	0	0	(
16	Occupancy	104,083	50,916	27,188	25,979
17	Travel	46,426	29,979	183	16,264
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	C
19	Conferences, conventions, and meetings .	36,904	27,133	2,797	6,974
20	Interest	0	0	0	(
21	Payments to affiliates	0	0	0	C
22	Depreciation, depletion, and amortization .	18,618	9,122	4,841	4,655
23	Insurance	0	0	0	(
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	State, Local, Federal Fee's	4,582	279	1,064	3,239
b	Outreach Meetings & Events	15,210	7,531	238	7,441
c	Learning & Capacity Building	11,053	10,778	0	275
d	Donor Vision Trips	17,467	17,467	0	(
е	All other expenses	0	0	0	C
25	Total functional expenses. Add lines 1 through 24e	5,330,635	4,218,460	467,013	645,162
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Form 990 (2019)

orm 990 (2 Part X	•			Page 11
	Check if Schedule O contains a response or note to any line in this Par	tX (A) Beginning of year		
1	Cash-non-interest-bearing	242,607	1	345,181
2	Savings and temporary cash investments	1,427,657	2	2,016,088
3	Pledges and grants receivable, net	3,406,074	3	2,270,884
4	Accounts receivable, net	0	4	0
5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	5	0
6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).	0	6	0
<u>φ</u> 7	Notes and loans receivable, net	0	7	0
Assets 6 8 2	Inventories for sale or use	0	8	0
9 A	Prepaid expenses and deferred charges	41,988	9	41,641
10a		41,700		
b		25,949	100	31,093
11	Less: accumulated depreciation 10b 132,711 Investments—publicly traded securities . . .	28,307	11	28,307
12	Investments—other securities. See Part IV, line 11	67,263	12	66,353
13	Investments—program-related. See Part IV, line 11	07,203	13	0
14		0	14	0
15	Other assets. See Part IV, line 11	7,017	15	0
16	Total assets. Add lines 1 through 15 (must equal line 33)	5,246,862	16	4,799,547
17	Accounts payable and accrued expenses	120,504	17	116,766
18		0	18	0
19	Deferred revenue	0	19	0
20	Tax-exempt bond liabilities	0	20	0
21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0		0
22 riabilities	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
lab	controlled entity or family member of any of these persons	0	22	0
_ 20	Secured mortgages and notes payable to unrelated third parties	0	23	31,247
24	Unsecured notes and loans payable to unrelated third parties	0	24	0
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 Schodulo D		05	
26	of Schedule D	0	25 26	140.010
Ennd Balances 22 28 28 28	Organizations that follow FASB ASC 958, check here \blacktriangleright	120,504	20	148,013
au	and complete lines 27, 28, 32, and 33.		07	
27 gala	Net assets without donor restrictions	1,479,284	27	2,294,099
면 28 호	Net assets with donor restrictions	3,647,074	28	2,357,435
	Organizations that do not follow FASB ASC 958, check here ► □ and complete lines 29 through 33.			
ົດ 29	Capital stock or trust principal, or current funds		29	
<u>کۆ</u> 30	Paid-in or capital surplus, or land, building, or equipment fund		30	
∛ ¥ 31	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or 30 31 32 33 33	Total net assets or fund balances	5,126,358	32	4,651,534
z 33	Total liabilities and net assets/fund balances	5,246,862	33	4,799,547 Form 990 (2019)

Form **990** (2019)

	00 (2019)				Pag	je
Part						г
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1			,855	
2	Total expenses (must equal Part IX, column (A), line 25)	2			,330	
3	Revenue less expenses. Subtract line 2 from line 1	3			-474	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		5	,126	,35
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				5
9	Other changes in net assets or fund balances (explain on Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10		4	, 6 51	,53
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII				•	
				Ye	es	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," ex	xplair	ı in			
	Schedule O.	-				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2	a		V
	If "Yes," check a box below to indicate whether the financial statements for the year were com	piled	or			
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		. 2	b v	/	
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed o	n 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 over	rsiah	t of			
Ŭ	the audit, review, or compilation of its financial statements and selection of an independent accounta			c v		
	If the organization changed either its oversight process or selection process during the tax year, ex					
	Schedule O.	piani				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	th in	the			
ou	Single Audit Act and OMB Circular A-133?			a		V
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und				-+	-
5	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a			Ь		

Form **990** (2019)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Inspection

33-0052976

Name of the organization
Department of the Treasury Internal Revenue Service

Employer identification number

FLORESTA USA INCORPORATED	

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.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 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).
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 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.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 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:
- 10 An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross 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.)
- 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 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.
 - a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving 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.
 - c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.
 - d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) 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.
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f $\;$ Enter the number of supported organizations $\;$. $\;$. $\;$. $\;$.

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

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

Part IISupport Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under
Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Secti	on A. Public Support			<i>.</i> •	•	,	
Calen	dar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	3,526,158	3,822,598	8,210,941	5,546,886	4,832,566	25,939,149
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	0	0	0	0
4	Total. Add lines 1 through 3	3,526,158	3,822,598	8,210,941	5,546,886	4,832,566	25,939,149
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						<u>6,349,000</u> 19,590,149
	on B. Total Support						17,070,147
	dar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4	3,526,158	3,822,598	8,210,941	5,546,886	4,832,566	25,939,149
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	3,499	6,726	1,593	16,448	23,192	51,458
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						25,990,607
12	Gross receipts from related activities, etc					12	0
13	First five years. If the Form 990 is for the organization, check this box and stop he on C. Computation of Public Support	re				ear as a sectio	
14	Public support percentage for 2019 (line (-		1 column (f))		14	75.37 %
15	Public support percentage from 2018 Sch		•			15	72.97 %
16a	33 ¹ / ₃ % support test - 2019. If the organi box and stop here. The organization qua	ization did not	check the box	on line 13, ar	nd line 14 is 33	¹ /3% or more,	check this
b	33 ¹ / ₃ % support test — 2018. If the organi this box and stop here. The organization						
17a	10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported						Explain in supported
b	10%-facts-and-circumstances test — 2 (15 is 10% or more, and if the organization resupported organization	ation meets the	e "facts-and-c ts-and-circums	vircumstances' stances" test.	' test, check t The organizati	this box and s on qualifies as	a publicly
18	Private foundation. If the organization di instructions						🕨 🗌
					Sch	edule A (Form 990	0 or 990-EZ) 2019

Schedule A (Form 990 or 990-EZ) 2019

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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	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						
Ŭ	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 .						
b							
b	Amounts included on lines 2 and 3 received from other than disgualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
_							
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
Socti	line 6.)						
	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6	(a) 2015	(b) 2010	(0) 2017	(u) 2018	(e) 2019	
	4						
10a	Gross income from interest, dividends, payments received on securities loans, rents,						
	royalties, and income from similar sources .						
b	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
_							
	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
40	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)				C(1) 1		
14	First five years. If the Form 990 is for th	•					
<u></u>	organization, check this box and stop he						🕨
	on C. Computation of Public Suppor	-					
15	Public support percentage for 2019 (line 8						%
16	Public support percentage from 2018 Sch					16	%
	on D. Computation of Investment Inc				(f)		
17	Investment income percentage for 2019 (•	())		%
18	Investment income percentage from 2018						%
19a	$33^{1}/_{3}\%$ support tests - 2019. If the organi						
-	17 is not more than $33^{1}/_{3}\%$, check this box	-	-	-		-	
b	$33^{1/3}$ % support tests – 2018. If the organiz						
•-	line 18 is not more than 33 ¹ / ₃ %, check this b	-	-	-			
20	Private foundation. If the organization di	d not check a	box on line 14	, 19a, or 19b,			
					Sch	nedule A (Form	990 or 990-EZ) 2019

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. 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

Page 5

2

1

Yes No

Yes No

Part	V Supporting Organizations (continued)		Yes	No
11 а	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)		103	
u	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
С	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,	-		

Section C. Type II Supporting Organizations

supervised, or controlled the supporting organization.

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).

Section 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? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>	0		
	supported organizations played in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete line 3 below.*
- 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.
- b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. *Answer (a) and (b) below.*
- **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.

2a

2b

3a

3b

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

Page

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.

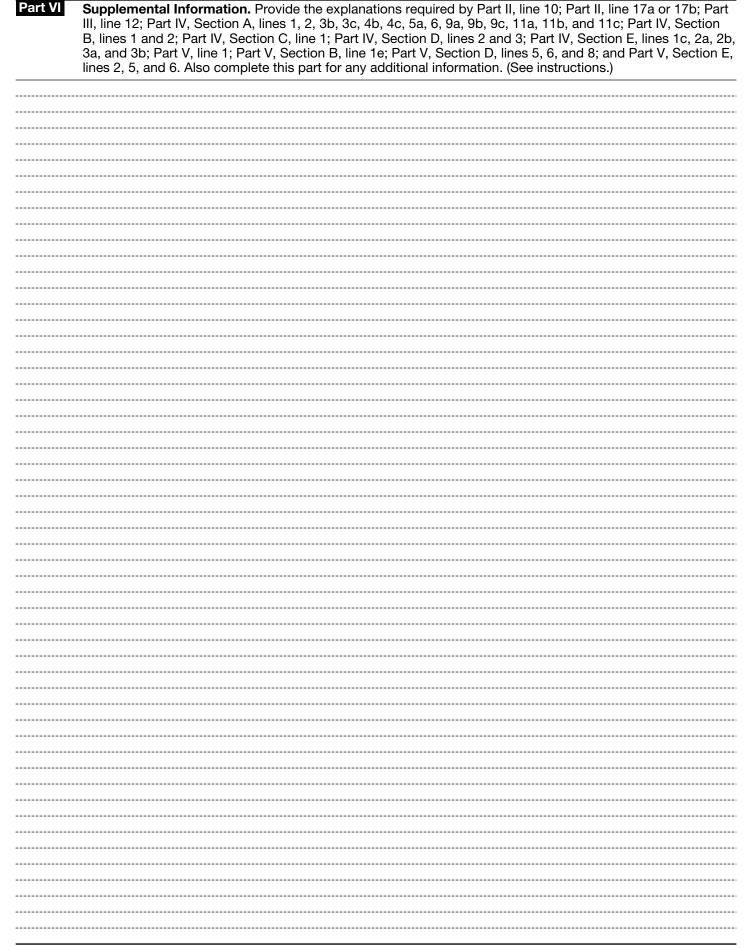
Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred 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 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) 2019

1 2	on D-Distributions			Current Year							
2	Amounts paid to supported organizations to accomplish e			Current rear							
	 Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported 										
	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity										
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations								
	Amounts paid to acquire exempt-use assets										
	Qualified set-aside amounts (prior IRS approval required)										
	Other distributions (describe in Part VI). See instructions.										
	Total annual distributions. Add lines 1 through 6.										
	Distributions to attentive supported organizations to whicl (provide details in Part VI). See instructions.	h the organization is res	ponsive								
	Distributable amount for 2019 from Section C, line 6										
	Line 8 amount divided by line 9 amount										
	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019							
1	Distributable amount for 2019 from Section C, line 6										
	Underdistributions, if any, for years prior to 2019 (reasonable cause required—explain in Part VI). See instructions.										
3	Excess distributions carryover, if any, to 2019										
	From 2014										
	From 2015										
	From 2016										
	From 2017										
	From 2018										
	Total of lines 3a through e										
	Applied to underdistributions of prior years										
	Applied to 2019 distributable amount										
	Carryover from 2014 not applied (see instructions)										
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.										
4	Distributions for 2019 from Section D, line 7: \$										
	Applied to underdistributions of prior years										
	Applied to 2019 distributable amount										
	Remainder. Subtract lines 4a and 4b from 4.										
5	Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.										
-	Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.										
	Excess distributions carryover to 2020. Add lines 3j and 4c.										
8	Breakdown of line 7:										
а	Excess from 2015										
	Excess from 2016										
	Excess from 2017										
	Excess from 2018										
	Excess from 2019										

Schedule A (Form 990 or 990-EZ) 2019



SCHEE	DULE D
(Form	990)

Department of the Treasury

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.

20**19** Open to Public Inspection

OMB No. 1545-0047

	Revenue Service	► Go to www.irs.gov/Form9	90 for instructions and the latest inform	ation. Inspection
Name o	of the organization			Employer identification number
	ESTA USA INCO			33-0052976
Par		-	sed Funds or Other Similar Fund	ls or Accounts.
	Comple	ete if the organization answered "	Yes" on Form 990, Part IV, line 6.	r
			(a) Donor advised funds	(b) Funds and other accounts
1		at end of year		
2		ue of contributions to (during year) .		
3		ue of grants from (during year)		
4	Aggregate valu	ue at end of year		
5			advisors in writing that the assets he organization's exclusive legal control	
6			nd donor advisors in writing that grant t of the donor or donor advisor, or fo	
Par		rvation Easements.		
		ete if the organization answered "	Yes" on Form 990, Part IV, line 7.	
1		conservation easements held by the o		
	,	of land for public use (for example, recrea	S	f a historically important land area
		of natural habitat	·	f a certified historic structure
	Preservatio	n of open space	_	
2			d a qualified conservation contributior	n in the form of a conservation
		he last day of the tax year.		Held at the End of the Tax Year
а	Total number of	of conservation easements		. 2a
b	Total acreage	restricted by conservation easements		. 2b
с	Number of cor	nservation easements on a certified hi	storic structure included in (a)	. 2c
d	Number of co	onservation easements included in (c) acquired after 7/25/06, and not o	n a 👘
	historic structu	ure listed in the National Register		. 2d
3	Number of cor tax year ►	nservation easements modified, trans	ferred, released, extinguished, or tern	ninated by the organization during the
4	Number of sta	tes where property subject to conserv	vation easement is located ►	
5			arding the periodic monitoring, insp ements it holds?	
6	Staff and volunt	teer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing	conservation easements during the year
7	Amount of exp	enses incurred in monitoring inspecting	handling of violations and enforcing	conservation easements during the year
•	► \$		y, handling of violations, and officially (senser valien easemente dannig the year
8			(d) above satisfy the requirements of s	
0	and section 17		onservation easements in its revenue	
9		•	the footnote to the organization's fina	•
		accounting for conservation easemer		
Part	-	-	of Art, Historical Treasures, or (Other Similar Assets
		ete if the organization answered "		
10				e statement and balance sheet works
Id	of art, historic	al treasures, or other similar assets		or research in furtherance of public
b	art, historical t		for public exhibition, education, or res	tatement and balance sheet works of earch in furtherance of public service,
	(i) Revenue in	cluded on Form 990, Part VIII, line 1	· · · · · · · · · · · · · · · ·	
2				assets for financial gain, provide the
2		unts required to be reported under FA		

а	Revenue included on Form 990, Part VIII, line 1		\$
		•	•

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

Schedu	le D (Form 990) 2019						Page 2		
Part	Organizations Maintaining	Collections of	Art, Historical	Freasures	, or Ot	ther Similar As	sets (continued)		
3	Using the organization's acquisition, collection items (check all that apply):		her records, chec	k any of th	e follov	ving that make si	gnificant use of its		
а	Public exhibition		d 🗌 Loan	or exchang	ie proai	ram			
b	Scholarly research			-					
c	Scholarly research e Other for future generations								
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.								
5	During the year, did the organization assets to be sold to raise funds rather						r Yes No		
Part				o organizati					
	Complete if the organization 990, Part X, line 21.	•	" on Form 990, I	Part IV, line	e 9, or	reported an am	ount on Form		
1a	Is the organization an agent, trustee, included on Form 990, Part X?						t Yes No		
b	If "Yes," explain the arrangement in Pa								
			0			Ar	nount		
с	Beginning balance				10	;			
d					10	1			
е	Distributions during the year				16	•			
f	Ending balance				11				
2a	Did the organization include an amou				ustodia	l account liability	?		
b	If "Yes," explain the arrangement in Pa					•			
Par									
	Complete if the organization	answered "Yes'	" on Form 990. I	Part IV. line	e 10.				
		(a) Current year	(b) Prior year	(c) Two yea		(d) Three years back	(e) Four years back		
1a	Beginning of year balance	67,263	66,348		65,137	63,149			
b		0	0		0	0			
c	Net investment earnings, gains, and	0	0			v			
Ŭ		-910	915		1,311	2,088	-1,715		
d	Grants or scholarships	0	0		0	0			
e	Other expenditures for facilities and								
Ŭ	programs	0	0		0	o	0		
f	Administrative expenses	0	0	-	100	100			
g	End of year balance	66,353	67,263		66,348	65,137			
2ັ	Provide the estimated percentage of t								
a	Board designated or quasi-endowmer	•	3 %	,	,,,				
b	Permanent endowment ►								
c	Term endowment ► 0 %								
•	The percentages on lines 2a, 2b, and		00%.						
3a	Are there endowment funds not in the	-		at are held	and ad	ministered for the	2		
ou	organization by:		lo organization th		und dd		Yes No		
	(i) Unrelated organizations						3a(i) 🖌		
							3a(ii) 🗸		
b	If "Yes" on line 3a(ii), are the related o						3b		
4	Describe in Part XIII the intended uses	•	•						
Part	VI Land, Buildings, and Equip								
	Complete if the organization		" on Form 990. I	Part IV. line	e 11a.	See Form 990.	Part X. line 10.		
	Description of property	(a) Cost or ot (investm	her basis (b) Cost	or other basis other)	(c)	Accumulated epreciation	(d) Book value		
1a	Land		0	0			0		
b	Buildings		0	0		0	0		
c	Leasehold improvements		0	0		0	0		
d	Equipment		0	113,851		86,149	27,702		
e	Other		0	49,953		46,562	3,391		
	Add lines 1a through 1e. (Column (d) n		90, Part X, columi))c.) .		31,093		

Schedule D (Form 990) 2019

Schedule D (Fo	Investments-Other Securities.		Page
	Complete if the organization answered "Yes" on Form 990, Part		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) Financia	derivatives		
	neld equity interests		
(3) Other			
(A)			
(C)			
(D)			
(E)			
(F) (G)			
(H)			
``	mn (b) must equal Form 990, Part X, col. (B) line 12.) . ►	-	
Part VIII	Investments – Program Related.		
	Complete if the organization answered "Yes" on Form 990, Part	IV, line 11c. See F	orm 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)	mn (b) must equal Form 990, Part X, col. (B) line 13.) . ►		
Part IX	Other Assets.		
	Complete if the organization answered "Yes" on Form 990, Part	IV line 11d See F	Form 990 Part X line 15
	(a) Description		(b) Book value
(1)			(-)
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	mn (b) must equal Form 990, Part X, col. (B) line 15.)		. ►
Part X	Other Liabilities.	IV line 11e or 11f	Saa Earm 000 Dart V
	Complete if the organization answered "Yes" on Form 990, Part line 25.	iv, line the or th	. See Form 990, Part X,
1.	(a) Description of liability		(b) Book value
(1) Federal ir			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Colu	mn (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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII .

Schedu	e D (Form 990) 2019				Page 4
Part	XI Reconciliation of Revenue per Audited Financial Statem	ents Wi	th Revenue per	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	4,855,758
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	0		
b	Donated services and use of facilities	2b	0		
С	Recoveries of prior year grants	2c	0		
d	Other (Describe in Part XIII.)	2d	0		
е	Add lines 2a through 2d			2e	0
3	Subtract line 2e from line 1			3	4,855,758
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.)		0		
c	Add lines 4a and 4b	· · · · · ·		4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	4,855,758
Part				-	
i ai c	Complete if the organization answered "Yes" on Form 990,			or motarm	
1	Total expenses and losses per audited financial statements			1	5,330,635
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			•	5,330,035
	Donated services and use of facilities	2a	0		
a L		2a 2b	0	-	
b	Prior year adjustments	-	0		
C	Other losses	2c	0		
d	Other (Describe in Part XIII.)	2d	0		_
e	Add lines 2a through 2d			2e	0
3	Subtract line 2e from line 1	· · ·		3	5,330,635
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0	-	
b	Other (Describe in Part XIII.)	4b	0		
_c	Add lines 4a and 4b			4c	0
5 Part	Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, lir</i> XIII Supplemental Information.	ne 18.) .		5	5,330,635
2; Par Sched per do	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part ule D, Part V, Line 4 - Permanent Endowment Funds are for the purpose of ac nor interest determined at time of donation, interest may be used for emerger se board of directors.	to provid cruing int	de any additional ir erest. Board design res funds upon app	formation. ated endow roval by the	ments, and as Plant With

SCHEDULE F		State		OMB No. 1545-0047				
(Form 990)			te if the organ		2019			
Departm	ent of the Treasury				Open to Public			
	Revenue Service		Go to www.irs	.gov/Form990	or instructions and the lates	t information.		Inspection
	f the organization						Employe	r identification number
	ESTA USA INCO		on Activit	ion Outoido	the United States Com	aplata if the area	nization	33-0052976
Part), Part IV, line		les Outside	the United States. Com	ipiete il trie orga	Inization	answered res on
1		ce, the grante	ees' eligibility	for the gran	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 monitorir	ng the use of its	grants a	nd other assistance
3	Activities per F	Region. (The fo	llowing Part	1	can be duplicated if addition	nal space is need	led.)	
	(a) Regior	1	(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 specifi service(s) in the	ervice, c 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	continuation						

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

17

237

2,881,198

1 (a) Name of (b) IRS code (c) Region (d) Purpose of (e) Amount of (f) Manner of (g) Amount of (h) Description (i) Method of section and EIN organization grant cash grant cash noncash of noncash assistance valuation (book, FMV, (if applicable) disbursement assistance appraisal, other) (1) Sub-Saharan Africa Environmental and ec 1,247,076 Wire transfers cash (2) Central America and Environmental and ec 1,057,122 Wire transfers cash (3) North America (inclu Environmental and ec 408,000 Wire transfers cash (4) South Asia Environmental and ec 169,000 Wire transfers cash (5) (6) (7) (8) (9) (10) (11) (12) (13) (14) (15) (16) 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ► 8 3 0

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

Schedule F (Form 990) 2019

Page 2

Part III can be duplica	ated if additional spa	ace is needed.		•	0		
(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) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							hodulo E (Earm 990) 2019

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

Schedule F (Form 990) 2019

Page 3

Sched	ule F (Form 990) 2019		Page 4
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	V No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," 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? 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)	☐ Yes	✓ 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).	🗌 Yes	🖌 No

Schedule F (Form 990) 2019

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 U.S. Director of International Programs, program officers, and accounting staff.

Schedule F, Part V, Statement 1

Form: Schedule F (2019)

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 watershed level, economic development through a savings group methodology, and spiritual renewal through partnerships with local churches.	7	70	1,057,122
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	408,000
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	169,000
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	1,247,076
	Total:	17	237	2,881,198

SCHE (Form Departr Internal	OMB No. 1545-0047						
	of the organization				nd the latest informa	Employer identi	
FLOR	RESTA USA INCORPORATED					3:	3-0052976
Par	t I Fundraising Activities Form 990-EZ filers are				vered "Yes" on I	Form 990, Part IV	, line 17.
1	Indicate whether the organizati	on raised funds t	hrough any		•		
а	Mail solicitations		е _		on of non-govern	-	
b	Internet and email solicitation	ons	f		on of governmen	•	
С	Phone solicitations		g	Special f	fundraising events	6	
d	In-person solicitations						
2a	Did the organization have a wr						
h	or key employees listed in Forr				•	•	
b	If "Yes," list the 10 highest pai compensated at least \$5,000 b		· ·	uraisers) pu	Irsuant to agreen		
	(i) Name and address of individual or entity (fundraiser)	(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							
Total				►			
3	List all states in which the org registration or licensing.	anization is regis	tered or lic	ensed to s	olicit contribution	is or has been noti	fied it is exempt from

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

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	(b) Event #2	(c) Other events	(d) Total events
			Annual Gala			(add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
ne						
Revenue	1	Gross receipts	404,827			404,827
ВĢ						
	2	Less: Contributions	0			0
	3	Gross income (line 1 minus				
		line 2)	404,827			404,827
	4	Cash prizes	0			0
	_					
	5	Noncash prizes	0			0
Se	6	Dept/facility/acata				
sus	6	Rent/facility costs	0			0
Direct Expenses	7	Food and beverages	0		0	0
ш т	· ·	1000 and beverages	0		U	0
irec	8	Entertainment	0		0	0
Δ					•	v
	9	Other direct expenses .	71,807			71,807
	-					
	10	Direct expense summary. Ac	ld lines 4 through 9 in c	olumn (d)		71,807
	11	Net income summary. Subtra				333,020
Pa	rt III	Gaming. Complete if th				or reported more than
		\$15,000 on Form 990-E	Z, line 6a.			
ē			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
enue				bingo/progressive bingo		col. (a) through col. (c))

enue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c)
Revenue	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct E	4	Rent/facility costs				
	5	Other direct expenses .				
	6	Volunteer labor	□ Yes % □ No	☐ Yes% ☐ No	□ Yes % □ No	
	7	Direct expense summary. Ac	ld lines 2 through 5 in c	olumn (d) . . .		
	8	Net gaming income summar	y. Subtract line 7 from li	ne 1, column (d)		
	a I	Enter the state(s) in which the or s the organization licensed to co f "No," explain:	ganization conducts ga onduct gaming activities	s in each of these states	s?	🗌 Yes 🗌 No
10		Vere any of the organization's g f "Yes," explain:	aming licenses revoked		· ·	

Schedu	le G (Form 990 or 990-EZ) 2019 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
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
	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
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	
	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) 2019

SCF	IEDUL	EL.	
			_

(Form 990 or 990-EZ)

Transactions With Interested Persons

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

► 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

FLORESTA USA INCORPORATED

Employer identification number 33-0052976

OMB No. 1545-0047

spectio

S

Public

ſ

Part I	Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only).
	Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disgualified person	(b) Relationship between disqualified person and	(c) Description of transaction	(d) Corrected?		
•		organization		Yes	No	
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
2	Enter the amount of tax incurre	ed by the organization managers or dis	qualified persons during the year			
	under section 4958					
З	Enter the amount of tax if any o	on line 2 above reimbursed by the organi	ization			

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 loan	fron	an to or 1 the zation?	(e) Original principal amount	(f) Balance due	(g) In c	lefault?	by bo	proved bard or hittee?	(i) Wr agreer	
			То	From			Yes	No	Yes	No	Yes	No
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
						\$						
Part III Grants or As	sistance Benet	fiting Interest	ed Pers	sons.								

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) 2019

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	e 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	
(1) Sch L, Stmt 1						
(2)						
(3)						
<u>(4)</u>				_		
(5) (6)						
(7)						
(8)						
(9)						
(10)						
Part V Supplemental Information. Provide additional information for	r responses to questions	on Schedule L (see	instructions).			
				·		

FLORESTA USA INCORPORATED

Schedule L, Part V, Statement 1 Form: Schedule L (2019)

Page: **2**

EIN: 33-0052976

Part IV

Description of Business Transactions Involving Interested Persons

		Amount of transaction
Name	Employee	61,263
Relationship with organization	Related to substantial contributor	
Description of transaction	wages	
Sharing Of Revenues	No	

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

 nent of th Revenue	,
 e	

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**19** Open to Public Inspection

Name of the organization
FLORESTA USA INCORPORATED

Employer identificat	ion number
33-0	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 on 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	~	7	122,133	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				ļ			
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► ()							
26	Other► ()							
27	Other► ()							
28	Other►()							
29	Number of Forms 8283 received							
	which the organization completed	Form 8283	3, Part IV, Donee Acknowle	agement	29	0	Vaa	Na
							Yes	No
30a	During the year, did the organiza							
	28, that it must hold for at least t					20-		
L	to be used for exempt purposes					30a		~
	If "Yes," describe the arrangement			a the number of our				
31						31	~	
32a	Does the organization hire or use	e third part	ies or related organization	s to solicit, process, or se	ll noncash			

b If "Yes," describe in Part II.
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.

.

. .

.

. .

.

contributions?

.

32a

V

. . .

.

Part II	Page 2 Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether
I alt li	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)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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



Name of the organization	Employer identification number
FLORESTA USA INCORPORATED	33-0052976
Form 990, Part VI, Section B, Line 11b - Form 990 draft was distributed by email to all governing men	bers of the board prior to the
electronic filing of Form 990.	
¥¥¥	
Form 990, Part VI, Section B, Line 12c - Conflict of Interest Policy and acknowledgment form were dis	stributed electronically to board
members in the spring of 2020. The form allowed space for each respective board member to disclos	
then signed and returned to the organization.	
X	
Form 990, Part VI, Section B, Line 15 - 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	
conducts evaluative research into comparative and equitable compensation of the CEO (including al	
compensation trends) based upon others in a similar position and in relation to organization size and	
the organizational standard of equitable pay occurs around the 50th percentile. At least four external	
peer data, etc) are referenced. Annual salaries of senior managers (and all employees) are determine	
Market rates are compiled by the COO and Director of Finance and Administration; and the CEO app	
communicated to the employee.	
Form 990, Part VI, Section C, Line 19 - Governing documents and Conflict of Interest Policy are availa	able to the public upon request
Financial Statements are available on the financial page of our website, in addition to available on wa	
Charity Navigator, etc	

Cat. No. 51056K

Schedule O, Statement 1

Form: Form 990 (2019)

Page: 1

FLORESTA USA INCORPORATED

EIN: 33-0052976

Part I, Line 1

Activity Or Mission Description

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.

Schedule O, Statement 2

Form: Form 990 (2019)

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 3	Schedule	Ο,	Statement	3
-------------------------	----------	----	-----------	---

Form: Form 990 (2019)

Page: 2

FLORESTA USA INCORPORATED

EIN: 33-0052976

Part III, Line 4d

Page: 2	Other Program Services Accomplishments		Pa	rt III, Line 4d
Activity Code	Description	Expense	Grants	Revenue
	MEXICO - Plant With Purpose Mexico is an example of faithful consistency. For over two decades Country Director Luis Alberto Castellanos has led our team in supporting marginalized indigenous communities living on degraded land in rebuilding their lives. Our program continues to grow in the regions of Oaxaca, Chiapas, and Puebla as families are applying 146 percent more sustainable farming techniques than nonparticipants. Their farms are 47 percent more diverse, leading to better nutrition, increased yield, and greater financial stability. This past year Plant With Purpose Mexico established 21 new Sustainable Development Groups. Even more exciting, our team has finalized big plans for expansion, this coming year to be our biggest year of expansion to date!	474,672	408,000	341,156
	BURUNDI - Despite implications of the global pandemic and ongoing national insecurity, partnering families in Burundi met and or exceeded each of their planned goals for this year. Over 10,000 farmers were equipped and commissioned to better manage their land and demonstrate innovative farming techniques to new partners. Our team continues to seek partnerships with complimentary organizations and research institutes, and we are thrilled to announce our recent partnership with HOPE International. We are teaming up with 74 of HOPE's existing savings groups, while providing our added agricultural training element to the curriculum, so that families might experience a greater holistic model of transformation.	541,445	436,076	190,079
	ETHIOPIA - In just two years, our newest program in Ethiopia is garnering great momentum. A stable and strong team of staff engaged over 700 participants to transform their lives. Over 230,000 tree seedlings have been planted by Plant With Purpose participants, local authorities, schools, and churches. Ethiopian staff are integrating into the global Plant With Purpose family through cross-cultural technical training. We are happy to report that we are now the proud owner of a new vehicle. The steady hard work and tenacity of the Ethiopia team is paying off as the program builds an energy all its own.	298,790	196,000	233,467
	CONGO - Since its inception in 2015, Plant With Purpose Democratic Republic of the Congo (DRC) has launched many savings groups in two watersheds. Women make up 72 percent of participants, which is encouraging for these communities where gender roles are strong. Further, participants have planted trees, reforested land and common areas, and built up personal farms. We are happy to share that we will be expanding our work into five additional watersheds (for a total of seven) in FY2021, in part thanks to a multi-year grant from the Kingdom Giving Fund. This gift will allow us to build the fundraising infrastructure needed to sustain 5x expansion over the next five years. We are thrilled to share God's love in a widening network of families in the DRC.	234,000	161,000	211,719
	THAILAND - Fiscal year 2020 brought a series of hardships for our team and partners in Thailand. Partners are responding with resilience and hope as they rebuild and weather multiple devastating storms, flooding, a global pandemic, and growing pains. In the midst of this, community members are sharing seeds, food, and other goods with each other- they demonstrate kindness and resilience during difficult times, and they are growing and moving forward together. In FY2020 they hosted almost 1,000 spiritual leadership training days and exceeded their tree planting goal for the year by 17 percent.	213,349	169,000	87,474
	PROGRAM ADVOCACY & EDUCATION: Plant With Purpose has expanded its efforts across the U.S. to become a leading voice on how Christians are called to steward the environment, and the link between environmental degradation and poverty. In 2020, for example, we developed educational tools on Sustainable Antiracism; worked on Season 2 of our Grassroots Podcast (to be launched in FY2021), which will address topics such as the intersection of racism and environmental degradation; and spoke at various events to educate attendees on the important role spiritual development and environmental	687,759	0	0

Schedule O, Statement 3

restoration play in addressing poverty alleviation.

Total:

2,450,015 1,370,076 1,063,895

Schedule O, Statement 4	FLORESTA USA INCORPORATED
Form: Form 990 (2019)	EIN: 33-0052976
Page: 6 States Where Copy O	Part VI, Section C, Line 17 f Return Is Filed
States	
AK	
AL	
AR	
AZ	
CA	
со	
СТ	
DE	
FL	
GA	
HI	
IA	
ID	
IL .	
IN	
KS	
КҮ	
LA	
MA	
MD	
ME	
MI	
MN	
MO	
MS	
MT	
NC	
ND	
NE	
NH	
NJ	
NM	
NV	
NY	
ОН	
ОК	
OR	

PA			
RI			
SC			
SD			
TN			
тх			
UT			
VA			
VT			
WA			
WI			
WV			
WY		 	

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.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)	-				
(3)					
(4)					
(5)					
(6)					

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 conti ent	g) 512(b)(13) rolled ity?
						Yes	No
(1) Floresta Ethiopia Gambia Street, Addis Ababa, Ethiopia	savings groups, agroforestry,	Ethiopia	501c3		Floresta USA Inc, dba Plant With	~	
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							



22.005007/

33-0052976

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, Part III because it had one or more related organizations treated as a partnership during the tax year. **(a)** Name, address, and EIN of **(b)** Primary activity (e) (g) (i) (k) (c) (d) (f) (h) (i) Direct controlling Predominant Share of total Share of end-of- Disproportionate General or Legal Code V-UBI Percentage related organization income (related, amount in box 20 domicile entity income year assets allocations? managing ownership unrelated, (state or of Schedule K-1 partner? excluded from (Form 1065) foreign tax under country) sections 512-514) Yes No Yes No (1) (2) (3) (4) (5) (6)

Part IV

(7)

Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, 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	(g) Share of end-of-year assets	(i Section 5 contr enti	rolled
							Yes	No
(1)								
(2)	-							
(3)								
(4)	-							
(5)	-							
(6)								
(7)	-							

Part	V Transactions With Related Organizations. Complete if the organization answ	vered "Ye	s" on For	m 990	, Part IV	/, line	34, 3	35b, (or 36	δ.			
Not	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.											Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one		•										
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity										1a		~
b	Gift, grant, or capital contribution to related organization(s)										1b	~	
С	Gift, grant, or capital contribution from related organization(s)										1c		~
d	Loans or loan guarantees to or for related organization(s)										1d		~
е	Loans or loan guarantees by related organization(s)							•			1e		~
f	Dividends from related organization(s)										1f		~
g	Sale of assets to related organization(s)										1g		~
h	Purchase of assets from related organization(s)										1h		~
i	Exchange of assets with related organization(s)										1i		~
j	Lease of facilities, equipment, or other assets to related organization(s)							•			1j		~
k	Lease of facilities, equipment, or other assets from related organization(s)										1k		V
I	Performance of services or membership or fundraising solicitations for related organization(s)								.	11		~
m	Performance of services or membership or fundraising solicitations by related organization(s))								.	1m		~
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .										1n		~
0	Sharing of paid employees with related organization(s)										10		V
	Deinskywaansent weid te veleted eveneniestien (e) few evenenees										4		
р	Reimbursement paid to related organization(s) for expenses										1p		<u>ィ</u> ィ
q	Reimbursement paid by related organization(s) for expenses			• •		• •	• •	•	• •	•	1q		~
r s	Other transfer of cash or property to related organization(s)										1r 1s		V V
2	If the answer to any of the above is "Yes," see the instructions for information on who must of	complete t	his line, inc	luding	covered	relatio	onship	os an	d tra	nsactic	on thre	eshol	ls.
	(a) Name of related organization	Tran	(b) saction e (a-s)	A	(c) mount invo	olved	M	lethod	of det	(d) termining	amour	nt invol	/ed
F	presta Ethiopia	b				196,00	00						
(1)							_						
(2)													
(3)							+						
(4)													
(5)													
(6)													

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

(b) Primary activity	(c) Legal domicile (state or foreign country)	unrelated, excluded from tax under	organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
		sections 512-514)	Yes	No			Yes	No		Yes	No	
							-					
	Primary activity	(state or foreign country)	(state or foreign country) income (related, excluded from tax under sections 512-514) .	(state or foreign country) income (related, unrelated, excluded from tax under sections 512-514) sec organiz yes ····- ····- ····- ····- ····-	(state or foreign country) income (related, unrelated, excluded from tax under sections 512-514) section organizations? ····- ···· ···· Yes No ····- ···· ···· ···· ···· Yes No ····- ···· ···· ···· ···· ···· ···· Yes No ····- ···· ···· ···· ···· ···· ···· ···· ···· ····- ···· ···· ···· ···· ···· ···· ···· ····- ···· ···· ···· ···· ···· ···· ···· ····- ···· ···· ···· ···· ···· ···· ···· ····- ···· ···· ···· ···· ···· ···· ···· ····· ···· ···· ···· ···· ···· ···· ····· ···· ···· ···· ···· ···· ···· ····· ···· ···· ····· ···· ···· <t< td=""><td>(state or foreign country) income (related, excluded from tax under sections 512-514) section 501(c)(3) organizations? total income ····- ···· ···</td><td>(state or foreign country) income (related, unrelated, excluded from tax under sections 512-514) total income section (501(c)(3)) end-of-year assets ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· <</td><td>(state or foreign country) income (related, urrelated, excluded form tax under sections 512-514) section 501(c)(3) organizations? total income end-of-year assets alloca ····· ···· ····</td><td>(state or foreign country) income (related, unrelated, excluded from tax under sections 512-514) section 501(c)(3) organizations? total income softion 501 end-of-year assets allocations? Image: Section 512-514) Yes No Yes No Image: Section 512-514) Yes No Image: Section 512-514) Yes No Image: Section 512-514) Yes No Image: Section 512-514) Yes No Image: Section 512-514) Image: Section 512-514)</td><td>(state or foreign country) income (related, unrelated, excluded from tax under sections 512-514) section 501(c)(3) (Fes total income sasets end-of-year assets allocations? (Fes amount in box 20 of Schedule K-1 (Form 1065) </td><td>$\left \left(\text{state or foreign} \\ \text{country} \right) \right \left \left(\text{state or foreign} \\ \text{country} \right) \right \left \left(\text{state or foreign} \\ \text{sections 512-514} \right) \right \\ \hline \mathbf{Yes} \\ \mathbf{No} \\ \hline \mathbf{Yes} \\ \hline \mathbf{No} \\ \hline \mathbf{Yes} \\ \mathbf{No} \\ \hline \mathbf{Yes} \\ \hline \mathbf{Yes} \\ \hline \mathbf{No} \\ \hline \mathbf{Yes} \\ \hline \mathbf{Yes} \\ \hline \mathbf{No} \\ \hline \mathbf{Yes} \\ \hline \mathbf{Yes}$</td><td>(state or foreign country) income (related, unrelated, excluded from tax under sections 512-514) section Solic(0) regainizions? total income assets end-of-year assets allocations? assets amount in box 20 of Schedule K-1 (Form 1065) manuality partner? </td></t<>	(state or foreign country) income (related, excluded from tax under sections 512-514) section 501(c)(3) organizations? total income ····- ···· ···	(state or foreign country) income (related, unrelated, excluded from tax under sections 512-514) total income section (501(c)(3)) end-of-year assets ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· <	(state or foreign country) income (related, urrelated, excluded form tax under sections 512-514) section 501(c)(3) organizations? total income end-of-year assets alloca ····· ···· ····	(state or foreign country) income (related, unrelated, excluded from tax under sections 512-514) section 501(c)(3) organizations? total income softion 501 end-of-year assets allocations? Image: Section 512-514) Yes No Yes No Image: Section 512-514) Yes No Image: Section 512-514) Yes No Image: Section 512-514) Yes No Image: Section 512-514) Yes No Image: Section 512-514) Image: Section 512-514)	(state or foreign country) income (related, unrelated, excluded from tax under sections 512-514) section 501(c)(3) (Fes total income sasets end-of-year assets allocations? (Fes amount in box 20 of Schedule K-1 (Form 1065)	$\left \left(\text{state or foreign} \\ \text{country} \right) \right \left \left(\text{state or foreign} \\ \text{country} \right) \right \left \left(\text{state or foreign} \\ \text{sections 512-514} \right) \right \\ \hline \mathbf{Yes} \\ \mathbf{No} \\ \hline \mathbf{Yes} \\ \hline \mathbf{No} \\ \hline \mathbf{Yes} \\ \mathbf{No} \\ \hline \mathbf{Yes} \\ \hline \mathbf{Yes} \\ \hline \mathbf{No} \\ \hline \mathbf{Yes} \\ \hline \mathbf{Yes} \\ \hline \mathbf{No} \\ \hline \mathbf{Yes} \\ \hline \mathbf{Yes}$	(state or foreign country) income (related, unrelated, excluded from tax under sections 512-514) section Solic(0) regainizions? total income assets end-of-year assets allocations? assets amount in box 20 of Schedule K-1 (Form 1065) manuality partner?

Part VII	Supplemental Information
	Provide additional information for responses to questions on Schedule R. See instructions.