Click on the question-mark icons to display help windows. The information provided will enable you to file a more complete return and reduce the chances the IRS will need to contact you.

Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

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

Open to Public

Department of the Treasury Internal Revenue Service		of the Treasury nue Service	► Go to www.irs.gov/Form990EZ for instructions and the latest information	tion.		Inspection	n –			
			r year, or tax year beginning , 2020, and ending			, 20				
	Check if ap		C Name of organization ?	D Emp	loyer ide	ntification number	3			
	Address c	change	INTERNATIONAL CARDIO-ONCOLOGY SOCIETY INC.			72139051	Balance			
	Name cha		Number and street (or P.O. box if mail is not delivered to street address) Room/suite	E Teler	ohone nu	mber				
	initial retu		465 LUCERNE AVE		813	248 4885 323	-74			
	rinai retun Amended	n/terminated return	City or town, state or province, country, and ZIP or foreign postal code	F Gro	up Exer					
		n pending	TAMPA,FLORIDA 33606		nber ▶					
-		ting Method:	☐ Cash ☑ Accrual Other (specify) ▶ ☐ ☐			the organization i	o not			
I V	/ebsite	E IC-OS				ch Schedule B	s not			
J Ta	ax-exen	npt status (che	ck only one) — ☑ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527			EZ, or 990-PF).				
			Corporation Trust Association Other							
LA	dd lines	s 5b, 6c, and	b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total	assets	1417 - Julius II.					
(Par	t II, colu	umn (B)) are \$	500,000 or more, file Form 990 instead of Form 990-EZ		▶ \$					
	art I		e, Expenses, and Changes in Net Assets or Fund Balances (see the	instru	ctions	for Part I)				
		Check if	the organization used Schedule O to respond to any question in this Part I				\Box			
?	1	Contributio	ns, gifts, grants, and similar amounts received		1	2766	-			
?	2		rvice revenue including government fees and contracts		2	5910	-			
?	3		dues and assessments		3	2245				
?	4	Investment			4		9.00			
	5a	Gross amou	unt from sale of assets other than inventory 5a	0						
	b		or other basis and sales expenses							
	C		ess: cost or other basis and sales expenses							
	6	Gaming and			0					
	а		oss income from gaming (attach Schedule G if greater than							
en	77.	\$15,000) .	· · · · · · · · · · · · · · · · · · ·							
Revenue	b	Gross incor	oss income from fundraising events (not including \$ 0 of contributions							
6			ising events reported on line 1) (attach Schedule G if the	110						
laber			gross income and contributions exceeds \$15,000) 6b	0						
			expenses from gaming and fundraising events 6c	0						
- 1			or (loss) from gaming and fundraising events (add lines 6a and 6b and sut	ntract						
		line 6c) .	the state of the s	Juan	6d		0			
	7a	Gross sales	of inventory, less returns and allowances 7a							
			of goods sold	0						
			or (loss) from sales of inventory (subtract line 7b from line 7a)		7-		0			
	8		(1		7c		0			
1	0		ue (describe in Schedule 0)		9	10941				
Expenses	10		similar amounts paid (list in Schedule O)	•	10	10011	0			
	11		d to or for members		11		0			
	12		ner compensation, and employee benefits 2	- 19	12		0			
	13		I fees and other payments to independent contractors		13	6428	7 94			
	14		, rent, utilities, and maintenance		14		0			
	15		blications, postage, and shipping		15		0			
	16		nses (describe in Schedule O)		16	2307				
	17				17	8735				
		Evene	nses. Add lines 10 through 16		18	2205				
sts	18 19	Not asset	or fund balances at beginning of year (from line 27, column (A)) (must agree		10	-				
SSE	10		figure reported on prior year's return)		19	7509	5.49			
Net Assets	20		ges in net assets or fund balances (explain in Schedule O)		20	1				
	20 21	Not accets	or fund balances at end of year. Combine lines 18 through 20		21	9714	8.30			
	61	Net assets	or rund balances at end or year. Combine lines to through 20							

							Page 2
?	Pa	Balance Sheets (see the instructions	for Part II)				W. 20 - 20 - 20 - 20 - 20 - 20 - 20 - 20
	WITHINGS	Check if the organization used Schedule	nv question in this	Part II		П	
				1	(A) Beginning of year	+	(B) End of year
	22	Cash, savings, and investments		-	77549.17	22	119171.16
	23	Land and buildings				23	0
	24	Other assets (describe in Schedule O)				24	0
	25	Total assets	* * * * * *		77549.17		119171.16
					2453.68		22022.86
	26	Total liabilities (describe in Schedule O)			75095.49		97148.30
BF93	27	Net assets or fund balances (line 27 of column				27	97148.30
?	Par						Expenses
		Check if the organization used Schedule	O to respond to a	ny question in this	Part III	(Rer	culred for section
	Wha	t is the organization's primary exempt purpose?					(c)(3) and 501(c)(4)
	Desc	ribe the organization's program service accompli	shments for each o	f its three largest p	rogram services,	orga	anizations; optional for
	as m	leasured by expenses. In a clear and concise m	nanner, describe the	e services provided	I, the number of	othe	ers.)
	pers	ons benefited, and other relevant information for ea					AND THE RESIDENCE OF THE PARTY
?	28	ARRANGE INTERNATIONAL CONFERENCES OF DO	CTORS,EDUCATORS,	AND MEDICAL RESE	ARCHERS IN		
		THE FEILD OF CARDIONCOLOGY, ALSO PUBLISH JOURNAL	S OF PEER REVIEWED	ARTICLES AND MONTH	LY		
		WEBINARS FOR MEDICAL CPE.					
	3	(Grants \$) If this amount	includes foreign gra	ants, check here .	▶ 🗀	28a	59102.96
	29			W. 170 You Could be a second as a second a			
		***************************************					1

		(Grants \$) If this amount	includes foreign gra	ints check here	■ □	29a	0
	30) II the direction	includes foreign gre	ants, check here .		200	+
	00						
		(Grants \$) If this amount	includes foreign are	unto chook horo		30a	0
	24	Other program services (describe in Schedule O)	includes foreign gra	ints, check here .		Sua	-
		Offer propriati services (describe in achequie of					
	91					24-	0
		(Grants \$) If this amount	includes foreign gra	ants, check here .	▶□	31a	The same of the sa
	32	(Grants \$) If this amount Total program service expenses (add lines 28a	includes foreign gra through 31a)	ants, check here .		32	59102.96
		(Grants \$) If this amount Total program service expenses (add lines 28a IV List of Officers, Directors, Trustees, and Key	includes foreign gra through 31a) y Employees (list each	ants, check here .	▶ □ ▶ pensated—see the in	32 struc	59102.96 ctions for Part IV)
	32	(Grants \$) If this amount Total program service expenses (add lines 28a	includes foreign gra through 31a) y Employees (list each	ants, check here n one even if not comp ny question in this	pensated—see the in	32 struc	59102.96 ctions for Part IV)
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Form 990-EZ (2020)

33 Did the organization engage in any significant activity not previously reported to the IRS7 if "Yes," provide a defailed description of each activity in Schedule O. 34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions 35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? 5 If "Yes," to line 35a, has the organization field a Form 990-T for the year? If "No," provide an explanation in Schedule O. Was the organization undergor a liquidation, dissolution, temporary in the organization of the organization of the organization of the organization stream the organization of the organization stream the organization of the organi	Name of Street	Part				_///	(80
33 Did the organization engage in any significant activity not previously reported to the IRS7 if "Yes," provide a detailed description of each activity in Schedule O 34 Were any significant changes made to the organizing or governing documents' if "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions 35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? bif "Yes" to line 35a, has the organization lied a Form 990-Tfor the year' if "No," provide an explanation in Schedule O Was the organization during the year' in "Yes," complete Schedule O, Part III . bid organization during organization such school (10(6)) organization subject to section 803(e) noted organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year' if "Yes," complete Schedule N. 35a Did the organization fundergo a liquidation, dissolution, termination, or significant disposition of net assets during the year' if "Yes," complete Schedule N. 35b Did the organization funders are plants of Schedule N. 36c Did the organization funders are plants of Schedule N. 37a Did the organization funders are plants of schedule N. 37b Did the organization funders are plants of schedule N. 37c Did the organization funders are plants of schedule N. 37d Did the organization funders are plants of schedule N. 37d Did the organization funders are plants of schedule N. 37d Did the organization funders are plants of schedule N. 37d Did the organization funders are plants of schedule N. 37d Did the organization funders are plants of schedule N. 37d Did the organization funders are plants of schedule N. 37d Did the organization funders are plants of schedule N. 37d Did the organization funders are plants of schedule N. 37d Did the organization funders are			instructions for Part V.) Check if the organization used Schedule O to respond to any question in the	is Part			-
Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions Did the organization have unrealed business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? Did the organization they unrealed business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? Did the organization the organization fled a Form 990-T for the year? If "No," provide an explanation in Schedule O. Was the organization dergo a liquidation, dissolution, citic(6) organization subject to section 6030(e) nothing reporting, and proxy tax requirements during the year? If "Yes," complete Schedule O, Part III . Did the organization fledgraph (submitted on the instructions > 366 366		33			res	No	-
s5a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 8a, and 7a, among others)? b "*Ves" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule C Was the organization a section 501(c)(d), 501(c)(5), or 501(c)(6) organization subject to section 603(d) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed				?
activities (such as those reported on lines 2, 6a, and 7a, among others)? b If "Yes" to line 35a, hes the organization field a Form 990-17 for the year? If "No," provide an explanation in Schedule of Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule c, Part III			change on Schedule O. See instructions	34		V	
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6035(e) notice reporting, and proxy tax requirements during the year? If "Yea," complete Schedule C, Part III . 36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yea," complete applicable parts of \$50+cdule N 37a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 38 Did the organization brown from, or make any loans to, any officer, director, frustee, or key employes; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? b if "Yea," complete Schedule L, Part II, and enter the total amount involved . 38b 39 Section 501(c)(7) organizations. Enter: a initiation fees and capital contributions included on line 9 . 33aa 3aa 33aa 3aaa 33aa 3aaa 33aa 3aaa 33aa 33aa 3aaa		35a		The contract of		V	
Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N 36 37a Brief armount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 37b bild the organization file Form 1120-POL for this year? 38b Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? If "Yes," complete Schedule L, Part II, and enter the total amount involved 38b Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 9 Gross receipts, included on line 9, for public use of club facilities 39b Gross receipts, included on line 9, for public use of club facilities 39b Section 501(c)(3) garnizations. Enter amount of tax imposed on the organization engage in any section 4955 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-E72 if "Yes," complete Schedule L, Part I contains any section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization 40c reimbursed by the organization 41 List the states with which a copy of this return is filed ▶ Telephone no. ▶ Located at ▶ At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in foreign country ▶ See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (EBAH). At any time during the calendar year, did the organ			Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,				-
b Did the organization file Form 1120-POL for this year? 38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? b If "Yes," complete Schedule L, Part II, and enter the total amount involved		36				V	?
Bid the organization borrow from, or make any loans to, any officer, director, frustee, or key employee; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? b if "Yes," complete Schedule L, Part II, and enter the total amount involved 38b Section 501(c)(7) organizations. Enter: a Initiation fees and capital contribiutions included on line 9 38a 38b Section 501(c)(7) organizations. Enter: a Initiation fees and capital contribiutions included on line 9 38b Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 498 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 etc. Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 888-T Located at ► At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country level as a bank account, securities account, or other financial account? If "Yes," enter the name of the foreign country level see the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). c At any time during the calendar year, did the organization maintain an office outside the United States? If "				37b		V	
b If "Yes," complete Schedule L, Part II, and enter the total amount involved		-	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were			~	?
a Initiation fees and capital contributions included on line 9 Gross receipts, included on line 9, for public use of club facilities Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶ Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958. Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization . At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 886-T. List the states with which a copy of this return is filled ▶ Telephone no. ▶ Located at ▶ At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country ▶ See the instructions for exceptions and filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country ▶ Section 491(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ Did the organization have a controlled entity within the mea			If "Yes," complete Schedule L, Part II, and enter the total amount involved	_			
Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ section 4912 ▶ section 4955 ▶ section 4956 ▶ section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I certain that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I certain that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I certain that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I certain that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I certain that has not been reported on any of its prior Forms 990 or 990-EZ in lieu of Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 13 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax in line 40c reimbursed by the organization operated one or more hospital facilities during the example of the foreign country 14 List the states with which a copy of this return is filed ▶ 15 Located at ▶ 16 Telephone no. ▶ 17 Telephone no. ▶ 18 Telephone no. ▶ 19 Telephone no. ▶ 21 P + 4 ▶ 21 P + 4 ▶ 21 P + 4 ▶ 22 P + 4 ▶ 23 At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account? If "Yes," enter the name of the foreign country ▶ 22 Section 501(c)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ 23 Did the organization operate one or more hospital facilities during the year? If "Yes," For		а	Initiation fees and capital contributions included on line 9				
b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 49\$6 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958. d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization of tax on the 40c reimbursed by the organization. e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T. List the states with which a copy of this return is filed ▶ Telephone no. ▶ Located at ▶ At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country ysuch as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ysuch as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ysuch as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ysuch as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ysuch as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ysuch as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ysuch as a bank account, securities account, or other financial accounts (FBAR). At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," Form 990 must		umana (SI)	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:	-			
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the At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). C At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country ▶ 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43 44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ c Did the organization receive any payments for indoor tanning services during the year? d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			ocated at		· ** ** ** ** ** ** ** **		•
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and enter the amount of tax-exempt interest received or accrued during the tax year		C		42c	118-25-04, 117	V	
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b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ c Did the organization receive any payments for indoor tanning services during the year? d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 45a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b 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," Form 990 and Schedule R may need to be completed instead of	,	44a		The state of the s	Yes	No	
c Did the organization receive any payments for indoor tanning services during the year? d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be			<u> </u>	•E
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		C	110-000-001-000-000-000-000-000-000-000		\vdash	V	•
b 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," Form 990 and Schedule R may need to be completed instead of		d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an	44d			
meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of	10.0	45a	AND DESCRIPTION OF THE PROPERTY OF THE PROPERT	45a		V	
		b	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of				
Form 990-EZ. See instructions	poster	************	Form 990-EZ. See instructions	45b		V	

	and the second s				ar se			162	MO	
46 Did	d the organization engage, directly or in	ndirectly, in political c	ampaign activities of	n behalf of	or in opposit	on				
	candidates for public office? If "Yes,"		, Part I				46			?
Part VI	Section 501(c)(3) Organization		ations 47 40h and	I FO		d-a-la	Jan E.	I'		
	All section 501(c)(3) organization 50 and 51.	is must answer que	stions 47-49b and	1 52, and 0	ompiete the	tab	iles to	or line	S	
	Check if the organization used Sc	hedule O to respond	to any augetion in	thic Dart V					П	
	Check if the organization asea oc	riculie O to respond	to any question in	tins rait v	<u> </u>	·		Yes	No	
47 Did	d the organization engage in lobbying	activities or have a	section 501(h) electi	on in effect	during the t	ax		163	140	
	ar? If "Yes," complete Schedule C, Par					47		V 1	7	
48 ls 1	the organization a school as described in	n section 170(b)(1)(A)(i	i)? If "Yes," complete	Schedule E	:		48		マ	?
	d the organization make any transfers t						49a		V	BOYA
	If "Yes," was the related organization a section 527 organization?									
	emplete this table for the organization's								key	
em	ployees) who each received more than	1 \$100,000 of comper	nsation from the orga			ent	er "N	one."		
	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	contribution benefit plans	th benefits, as to employee s, and deferred ensation			d amou pensati		
				1	0.7543077	_				

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				-		-				
f To	tal number of other employees paid ov	er \$100 000	NON	E		+				
<b>51</b> Co	emplete this table for the organization' 00,000 of compensation from the organ	s five highest compe	ensated independent	-	rs who each	rece	ived	more	than	
	(a) Name and business address of each independ	The second secon			T (4)			_	-	
	(a) Name and business address of each independ	ent contractor	(b) Type of ser	vice	(c)	Jomp	ensatio	n		
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		Proposition of the second seco			<del> </del>	-			-	
					1	1			audinos estados.	
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	tal number of other independent contra	TO 100 TO		▶	NOI	+-				
	d the organization complete Schedu	ule A? Note: All se	ction 501(c)(3) orga	anizations	must attach		1		_	
	mpleted Schedule A	· · · · · · · ·	<u> </u>	· · ·	<u>.</u>		Yes		lo_	
Under penalt true, correct,	ties of perjury, I declare that I have examined this, , and complete. Declaration of proparer (other than	return, including accompan n officer) is based on all info	ying schedules and staten irmation of which preparer	nents, and to the has any know	ne best of my kno ledge.	owled	ge and	bellet, I	t is	
	Salle all				3-1-21	02	1			
Sign	Signature of officer		- 1	D	ate		4			
Here	Stadlen (ASSELLI	EXECUTIVE	Pirector		TARREST TO SEC.					
	Type or print name and title					1				
Paid	Print/Type preparer's name	Preparer's signature		ate	Check	if	PTIN			
Prepare	er		L		self-employ	ed				
Use On	ly Firm's name ▶				rm's EIN ▶	+		-		
May the !!	Firm's address ▶ RS discuss this return with the prepare	r shown above? See	instructions	I P	hone no.	> V	Yes		No	
ividy life II	To discuss this return with the prepare	OTOTAL COOKE: OGG			PHILIPPINA THE PRINCE	-	THE REAL PROPERTY.	0-EZ	SECTION AND PROPERTY.	
						1 0			1	