(Rev. January 2020) Department of the Treasury Internal Revenue Service

Return of Organization Exempt Fi Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue C

Do not enter social security numbers on this form as

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and to A For the 2019 calendar year, or tax year beginning JUL 1, 2019 and er

rom Income Tax	OMB No. 1545-0047							
Code (except private foundations)	2019							
s it may be made public.	Open to Public Inspection							
the latest information.	Inspection							
nding .TIIN 30 2020								

A	For the 2	2019 calendar year, or tax year beginning $$	JUN 30,	2020	
	Check if	C Name of organization	_		ation number
_	applicable:	HUNTER COLLEGE HIGH SCHOOL ALUMNAE/I	,		
	Address change	ASSOCIATION			
F	Name change	Doing business as	┨ 13-3	9533	96
F	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/si			
	Final return/	HUNTER COL- 695 PARK AVE 1313		772-4	
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code	G Gross receip		11,732,781.
	Amended		H(a) Is this a		
	Applica-	F Name and address of principal officer: FREDERICK YEE		ordinates	
	pending	SAME AS C ABOVE			cluded? Yes No
$\overline{\mathbf{T}}$	Tax-exen				list. (see instructions)
		► WWW.HCHSAA.ORG	H(c) Group		
		·			State of legal domicile: NY
_		Summary		1	g
_	T 4 D.	riefly describe the organization's mission or most significant activities: SEE SCHE	DULE O		
Governance					
rna	2 C	heck this box if the organization discontinued its operations or disposed of n	nore than 25% of	its net as	sets.
Š	3 N	umber of voting members of the governing body (Part VI, line 1a)		1 1	17
Ğ	4 N	umber of independent voting members of the governing body (Part VI, line 1b)		····	17
Š		otal number of individuals employed in calendar year 2019 (Part V, line 2a)		····	4
ij		otal number of volunteers (estimate if necessary)		····	45
Activities		otal unrelated business revenue from Part VIII, column (C), line 12			0.
⋖		et unrelated business taxable income from Form 990-T, line 39			0.
		,	Prior Yea		Current Year
ø)	8 C	ontributions and grants (Part VIII, line 1h)	793,	070.	846,825.
ŭ		rogram service revenue (Part VIII, line 2g)	24,	128.	49,371.
Revenue		vestment income (Part VIII, column (A), lines 3, 4, and 7d)	5,	166.	30,131.
ď		ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		576.	19,454.
	1	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	823,	940.	945,781.
		rants and similar amounts paid (Part IX, column (A), lines 1-3)	159,	470.	144,061.
		enefits paid to or for members (Part IX, column (A), line 4)		0.	0.
S	1	alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	209,	476.	249,839.
Expenses	16a Pi	rofessional fundraising fees (Part IX, column (A), line 11e)		0.	0.
g	b To	otal fundraising expenses (Part IX, column (D), line 25) 100,411.			
û	17 O	ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	235,	028.	199,730.
		otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	603,	974.	593,630.
	1	evenue less expenses. Subtract line 18 from line 12	219,	966.	352,151.
200	8		Beginning of Curr	ent Year	End of Year
sets	20 To	otal assets (Part X, line 16)	1,468,		1,876,881.
Net Assets or Fund Balances	21 To	otal liabilities (Part X, line 26)		304.	51,077.
<u> </u>	22 N	et assets or fund balances. Subtract line 21 from line 20	1,461,	582.	1,825,804.
_		Signature Block			
Unc	der penalti	es of perjury, I declare that I have examined this return, including accompanying schedules and sta	tements, and to the	best of my	knowledge and belief, it is
true	e, correct,	and complete. Declaration of preparer (other than officer) is based on all information of which prep	arer has any knowle	edge.	
	- 11				
Sig	ın J	Signature of officer	Date		
He	re 📗	FREDERICK YEE, TREASURER			
		Type or print name and title	I DI-		DTIN
_		Print/Type preparer's name Preparer's signature	Date	Check	PTIN
Pai -	<u> </u>	ENNIFER COATES	1	self-employe	
		irm's name LUTZ AND CARR, CPAS LLP	Firm'	s EIN ▶	13-1655065
Use	Only	irm's address 551 FIFTH AVENUE, SUITE 400		64	0 605 0000
		NEW YORK, NY 10176	Phor	ie no. 21	2-697-2299
Ма	y the IRS	discuss this return with the preparer shown above? (see instructions)			X Yes No

Form	HUNTER COLLEGE HIGH SCHOOL ALUMNAE/I ASSOCIATION	13-3953396	Page 2
	rt III Statement of Program Service Accomplishments		r age z
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
•	THE MISSION OF THE HCHSAA IS TO SUSTAIN A SOCIAL AND	PROFESSIONAL	
	NETWORK FOR ALUMNAE/I AND TO PROVIDE SUPPORT TO THE H		D
	ITS STUDENTS.		
2	Did the organization undertake any significant program services during the year which were not listed on the	ie	
	prior Form 990 or 990-EZ?	Yes	s X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service	ces?Ye:	s X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program service	s, as measured by expense	es.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	others, the total expenses	, and
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 138,286 • including grants of \$ 138,286 •) (F	Revenue \$	
	GRANTS TO THE HIGH SCHOOL:		
	IN FISCAL YEAR 2020, THE HCHSAA, THROUGH ITS GRANTS P		
	\$138,286 TO THE HIGH SCHOOL FOR THE FOLLOWING PROGRAM		LES:
	VISITING ARTISTS SERIES, YEARBOOK SUPPORT, CLASSROOM		
	PURCHASES OF NEW AEDS, HEART RATE SENSORS, AND SOUND		
	HEALTH AND PHYSICAL EDUCATION DEPARTMENT, PURCHASES O		
	EQUIPMENT, LAB EQUIPMENT, AND PLAQUES FOR THE SCIENCE		
	ROBOTICS TEAM ENHANCEMENTS. INCLUDED IN THESE EXPENDED TO PROVIDE TEST PREP FOR ACADEMICALLY ADVANCED STATES.		, 304
	LOW-INCOME NEIGHBORHOODS AND RACIALLY ISOLATED SCHOOL		ΕVλΜ
	SCHOOLS PARTNERSHIP INITIATIVE. DUE TO THE COVID19 PA		
46	200 000	NDEMIC, IIIE A	1/18
4b	(Code:) (Expenses \$ 208,060 • including grants of \$) (F ALUMNI SERVICES:	Revenue \$, ==0 •
	ADDINI DERVICED:		
	IN FISCAL YEAR 2020, THE ASSOCIATION ENGAGED THE ALUM	NAE/T COMMUNT	rγ
	WITH A SERIES OF PROGRAMS, EVENTS, AND COMMUNICATIONS		
	PROGRAMS WERE OFFERED BEFORE THE OUTBREAK OF THE CORO		
	WHICH RESULTED THE SHIFTING OF EVENTS TO A VIRTUAL MO		
	OUR IN PERSON EVENTS CONSISTED OF THE ANNUAL AUTUMN R		
	BOOK CATALOGUER JONAH ROSENBERG; A TOUR OF THE SCHOMB		
	RESEARCH IN BLACK CULTURE; A PERFORMANCE GIVEN BY FRE		
	SUPREME A HIP HOP IMPROVISATIONAL GROUP LED BY LIN-M		AND

ARTHUR LEWIS; A THANKSGIVING WEEKEND GATHERING FOR YOUNG ALUMS IN WILLIAMSBURG, BROOKLYN; A TOUR OF THE ROUNDABOUT THEATRE COMPANY

_	(Oode) (Expenses #	Including grants of \$) (Nevenue 4	<i>'</i>
d	Other program services (Describe on Schedule O.)			
		E 77E .	,	

352,121.

Form **990** (2019)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
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		X
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		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
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		X
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			,,
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
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		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			٦,
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			,,,
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
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		X
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	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		77	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	I

HUNTER COLLEGE HIGH SCHOOL ALUMNAE/I ASSOCIATION

Form 990 (2019)

13-3953396

Page 4

Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?//f			
_	"Yes, " complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
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		x
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		X
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		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	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		Х
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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
		38	Х	
Pa	Note: All Form 990 filers are required to complete Schedule 0 It 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			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a	2		
b)		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	10	Х	

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Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

					Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns?		2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
				3a		_X_
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		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other		-			
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	ınt)?	4a		X
b	If "Yes," enter the name of the foreign country					
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A			_		v
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		$\frac{x}{x}$
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa			5b		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
oa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to any contributions that were not tax deductible as charitable contributions?			6a		Х
h	any contributions that were not tax deductible as charitable contributions?			0a		
D	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).			3.5		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices	provided to the payor?	7a		Х
	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w					
	to file Form 8282?			7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	contra	ct?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control	ract?		7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file February	orm 8	899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	d by th	ne			
				8		
9	Sponsoring organizations maintaining donor advised funds.					
				9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12	10a	I			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a				
11	Section 501(c)(12) organizations. Enter:	100				
	Gross income from members or shareholders	11a	1			
	Gross income from other sources (Do not net amounts due or paid to other sources against	1.4				
	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		?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	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.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the		1			
	organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand			44		X
				14a		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedules the explanation subject to the explanation of the explanatio			14b	\vdash	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune			15		Х
	excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.			15		22
16	Is the organization an educational institution subject to the section 4968 excise tax on net investmen	nt inco	nme?	16		Х
	If "Yes," complete Form 4720, Schedule O.	100				
				F		(2010)

Page 6

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI				Λ
Sec	tion A. Governing Body and Management			_	
		4	7	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 1	. 7		
	If there are material differences in voting rights among members of the governing body, or if the governing				
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
b	Enter the number of voting members included on line 1a, above, who are independent	1 _{1b} 1	.7		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with any other			
	officer, director, trustee, or key employee?		2		Х
3	Did the organization delegate control over management duties customarily performed by or under the		· 🖵		
Ü	of officers, directors, trustees, or key employees to a management company or other person?		3		x
					X
4	Did the organization make any significant changes to its governing documents since the prior Form		· 🗀	+	X
5	Did the organization become aware during the year of a significant diversion of the organization's as			177	├ ^
6	Did the organization have members or stockholders?		. 6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint one or		l	
	more members of the governing body?		. 7a	X	
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		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye	ar by the following:			
а	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		۱	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea				
Ŭ	organization's mailing address? If "Yes," provide the names and addresses on Schedule O		9		X
Sac	tion B. Policies (This Section B requests information about policies not required by the Internal R		. 3		
	tion B. Folloics (This Section B requests information about policies not required by the internal n	evenue code.)		Yes	No
100	Did the expenientian have level shorters branches or offiliates?		10a		X
	Did the organization have local chapters, branches, or affiliates?		. 100	1	125
D	If "Yes," did the organization have written policies and procedures governing the activities of such c		401		
	and branches to ensure their operations are consistent with the organization's exempt purposes?			77	
	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	before filing the form?	11a	<u>^</u>	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			1 37	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise		. 12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," describe			
	in Schedule O how this was done		120		
13	Did the organization have a written whistleblower policy?			X	
14	Did the organization have a written document retention and destruction policy?		. 14	Х	
15	Did the process for determining compensation of the following persons include a review and approve	al 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	X	
	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 arrange	ment with a			
	taxable entity during the year?		. 16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	nization's			
	exempt status with respect to such arrangements?		. 16b	,	
Sec	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ▶NY				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, a	and 990-T (Section 501(c)(3)s on	ly) avai	lable
	for public inspection. Indicate how you made these available. Check all that apply.	`			
		on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, c		and fin	ancial	
	statements available to the public during the tax year.	1 7,			
20	State the name, address, and telephone number of the person who possesses the organization's bo	ooks and records			
	FREDERICK YEE - 212-772-4079				
	HUNTER COL- 695 PARK AVE, NO. 1313B, NEW YORK, NY	10065-5024			
	•				

7382___1

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

Check if Schedule O contains a response or note to any line in this Part VII

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

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

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

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

(A) Name and title	(B) Average hours per	box	not c	ss pe	ition more rson	than is bot	h an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer Officer		Highest compensated highest compensated mat/xrd		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) RAYMOND TSAO	3.00							0	0	
PRESIDENT	2 00	Х		Х				0.	0.	0.
(2) CLAUDIA JUSTY	3.00								0	_
EXECUTIVE VICE PRESIDENT	2 00	Х		Х				0.	0.	0.
(3) ANNE SILVERSTEIN	3.00								0	_
TREASURER		Х		Х				0.	0.	0.
(4) PEGGY BLUMENTHAL	3.00								0	_
SECRETARY	1 00	Х		Х				0.	0.	0.
(5) ELI ADLER	1.00	l							•	
BOARD MEMBER	1 00	Х						0.	0.	0.
(6) JUDITH DANIEL-GEORGE	1.00	l							•	
BOARD MEMBER		Х						0.	0.	0.
(7) ALEXANDRA FRIEDMAN	1.00								•	
BOARD MEMBER		Х						0.	0.	0.
(8) CLAIRE FRIEDMAN	1.00								•	
BOARD MEMBER		Х						0.	0.	0.
(9) CHRISTINE JUNG	1.00									
BOARD MEMBER		Х						0.	0.	0.
(10) ANNA KOVNER	1.00								_	_
BOARD MEMBER		Х						0.	0.	0.
(11) MYRNA MANNERS	1.00							_	_	_
BOARD MEMBER		Х						0.	0.	0.
(12) ROSA OPPENHEIM	1.00								_	_
BOARD MEMBER		Х						0.	0.	0.
(13) GABE ROSENBERG	1.00								_	_
BOARD MEMBER		Х						0.	0.	0.
(14) DAVID STEFANOU	1.00							_	_	_
BOARD MEMBER		Х						0.	0.	0.
(15) ADAM STOLZ	1.00									_
BOARD MEMBER		Х			<u> </u>			0.	0.	0.
(16) CONSTANCE WILLIAMS	1.00]						_	_	_
BOARD MEMBER		Х			<u> </u>			0.	0.	0.
(17) FREDERICK YEE	1.00	_						_	_	_
BOARD MEMBER		Х						0.	0.	0 . Form 990 (2019)

932007 01-20-20

Form **990** (2019)

Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees.	, and	d Hi	ighe	st (Compensated Employe	es (continued)				
(A)	(B)			(C				(D)	(E)			(F)	
Name and title	Average	(do	not c	Posi			one	Reportable	Reportable		Es	timate	d
	hours per	box	, unle	ss pe	rson	is bot	h an	1 '	compensation		ar	nount	of
	week (list any	_	CCI all	lu a u	II ecit)/ ii us	100)	from	from related			other	
	hours for	irecto						the organization	organization (W-2/1099-MIS			pensa om the	
	related	e or d	tee			sated		(W-2/1099-MISC)	(88-2/1099-18113	3C)		anizati	
	organizations	truste	al trus		ee/	mpen		(** 27 1000 141100)				d relat	
	below	Individual trustee or director	Institutional trustee	<u>ا</u>	key employee	est co oyee	-Ba					anizatio	
	line)	Indiv	Instit	Officer	Key e	Highest compensated employee	Former						
(18) ELYSE REISSMAN	28.00												
EXECUTIVE DIRECTOR				Х				85,000.		0.			0.
					 								
1b Subtotal								85,000.		0.			0.
c Total from continuation sheets to Part V								0.		0.			0.
d Total (add lines 1b and 1c)							<u> </u>	85,000.		0.			0.
2 Total number of individuals (including but n	ot limited to th	ose	liste	ed al	bove	e) wł	no r	eceived more than \$100	,000 of reportab	le			_
compensation from the organization												· ·	0
O Did the consequent in the conference of the co	-10						. 1- 1-		.1	ļ		Yes	No
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s	•		•		•		•		•		3		Х
4 For any individual listed on line 1a, is the su											,		
and related organizations greater than \$15	=		-					<u>-</u>	the organization		4		Х
5 Did any person listed on line 1a receive or a									idual for services		•		
rendered to the organization? If "Yes," com	· · · · · · · · · · · · · · · · · · ·				-			~			5		Х
Section B. Independent Contractors													
1 Complete this table for your five highest co										npens	ation '	rom	
the organization. Report compensation for	the calendar y	ear	endi	ng v	vith	or w	ithi		year.				
(A) Name and business	address	NIC	ONE	7				(B) Description of s	services	C)) Ompe	;) nsatio	า
		111	7141				-	2000p		<u> </u>			
							_						
2 Total number of independent contractors (i	ncluding but n	ot li	mite	d to		_	stec	d above) who received n	nore than				
\$100,000 of compensation from the organi	zation >				(0							
											Form	990 (2	2019)

932008 01-20-20

	ո 99 rt \				IAIION					13-3933	390 Page 9
Pa	rt v	/111									
			Check if Schedule O	conta	ains a respon	se or note	to any lin	e in this Part VIII (A) Total revenue	(B) Related or exempt function revenue	Unrelated	Revenue excluded
ts ts	1	<u>а</u>	Federated campaigns		1a						
au	١.		Membership dues			,	52,800.				
Contributions, Gifts, Grants and Other Similar Amounts			Fundraising events				32,000.				
ifts Ir A			Related organizations								
nia Big			Government grants (contr								
Sir											
ig je		T	All other contributions, gifts, similar amounts not included			70	94,025.				
음물					··· —		94,023.				
ŠĒ		_	Noncash contributions included in					846,825.			
0 6		n	Total. Add lines 1a-1f				ss Code	840,825.			
a	١,	_	OTHER PROGRAM INCOM	.		6111		48,746.	48,746.		
Ϋ́	2	a		ь		6110		48,748.	625.		
Ser.		b	REUNION			- 6110	00	625.	625.		
Yen S		С.									
gra Re		d									
Program Service Revenue		e	All II								
_		Τ	All other program service					40 271			
	-		Total. Add lines 2a-2f					49,371.			
	3		Investment income (included the semilar amounts)	-				15,211.			15,211.
	١,		other similar amounts) Income from investment of					13,211.			13,211.
	4 5				=	=					
	5		Royalties	·····	(i) Real		ersonal				
	_	_	Cross rents	60	(i) Fical	(11) 1 0	Jisonai				
	١٥			6a 6b							
			Less: rental expenses	6c							
			Rental income or (loss)								
	,		Net rental income or (loss) Gross amount from sales of) <u> </u>	(i) Securitie	_	▶ Other				
	' '	а	assets other than inventory		10,801,92		20161				
			•	/a	10,001,92						
Φ		D	Less: cost or other basis	7.	10,787,00	ا ۱					
Revenue		_	and sales expenses								
ě		C	Gain or (loss)	76	14,52			14,920.	14,920.		
	١,		Net gain or (loss)			·····		14,520.	14,520.		
Other	*	а	Gross income from fundraising including \$								
O			including \$ contributions reported on								
			· · · · · · · · · · · · · · · · · · ·		· ·	_					
		L	Part IV, line 18 Less: direct expenses			8a 8b					
					·						
	٥		Net income or (loss) from Gross income from gamin		· · ·	• <u> </u>	····· •				
	9	а				_					
		L	Part IV, line 19			9a 9b					
			Net income or (loss) from								
	40		Gross sales of inventory,	-	· -	<u> </u>					
	'0	а	and allowances		I	10a	1,157.				
		h	Less: cost of goods sold			0b	0.				
			Net income or (loss) from					1,157.	1,157.		
			NOT INCOME OF (1022) HOTH	sait	o in inventory		ss Code	1,157.	1,137.		
Snc	11	2	MISCELLANEOUS INCOM	E		9000		18,297.			18,297.
Miscellaneous Revenue	l ''	a b	INCOM			- - 5000		10,257.			10,257.
ella •Ver		C				-					
<u> </u>			All other revenue			-					
Σ			Total. Add lines 11a-11d					18,297.			
-	12		Total revenue. See instruction					945,781.	65,448.	0.	33,508.

932009 01-20-20

7382___1

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Do	Check if Schedule O contains a respon not include amounts reported on lines 6b,	(A)	(B)	(C)	_ (D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations	120 206	120 206		
	and domestic governments. See Part IV, line 21	138,286.	138,286.		
2	Grants and other assistance to domestic	E 77E	E 77E		
_	individuals. See Part IV, line 22	5,775.	5,775.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
4	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	82,073.	38,574.	9,849.	33,650
6	trustees, and key employees Compensation not included above to disqualified	02,075	30,374	7,047.	33,030
0	persons (as defined under section 4958(f)(1)) and				
	naraana dagarihad in agatian 40E0(a)(0)(D)				
7	Other salaries and wages	116,078.	54,557.	53,560.	7,961
7 8	Pension plan accruals and contributions (include		3=,337•	33,300.	,,,,,,,
o	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	24,703.	11,610.	7,905.	5,188
10	Payroll taxes	26,985.	12,683.	8,635.	5,667
11	Fees for services (nonemployees):		,000.		2,001
··					
b					
c		18,339.		18,339.	
	Lobbying				
e	D () ()) O D N 17				
f	Investment management fees				
g	// / / L 100/ / L 100/				
J	column (A) amount, list line 11g expenses on Sch O.)	20,606.	2,568.	18,038.	
12	Advertising and promotion				
13	Office expenses	118,955.	65,577.	10,598.	42,780
14	Information technology	1,254.			1,254
15	Royalties				
16	Occupancy				
17	Travel	1,248.	1,173.	75.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	1,053.		1,053.	
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 0.)				
а	PROGRAM AND EVENTS	21,410.	21,318.	92.	
b	MISCELLANEOUS EXPENSES	16,865.		12,954.	3,911
c					· · · · · ·
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	593,630.	352,121.	141,098.	100,411
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)

Part X Balance Sheet

Cash - non-interest-bearing Savings and temporary cash investments Pledges and grants receivable, net Accounts receivable, net Loans and other receivables from any currer trustee, key employee, creator or founder, s controlled entity or family member of any of Loans and other receivables from other disc under section 4958(f)(1)), and persons desc Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or oth basis. Complete Part VI of Schedule D Less: accumulated depreciation	nt or former office ubstantial contractions these persons qualified persons ribed in section	cer, director, ibutor, or 35% s (as defined 4958(c)(3)(B)	(A) Beginning of year 147,458 91,061	. 1	(B) End of year 123,874. 191,709.
Savings and temporary cash investments Pledges and grants receivable, net Accounts receivable, net Loans and other receivables from any currer trustee, key employee, creator or founder, s controlled entity or family member of any of Loans and other receivables from other disc under section 4958(f)(1)), and persons desc Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or oth basis. Complete Part VI of Schedule D	nt or former office ubstantial contractions these persons qualified persons ribed in section	cer, director, ibutor, or 35% s (as defined 4958(c)(3)(B)	Beginning of year 147,458	2 3 4	End of year 123,874.
Savings and temporary cash investments Pledges and grants receivable, net Accounts receivable, net Loans and other receivables from any currer trustee, key employee, creator or founder, s controlled entity or family member of any of Loans and other receivables from other disc under section 4958(f)(1)), and persons desc Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or oth basis. Complete Part VI of Schedule D	nt or former office ubstantial contractions these persons qualified persons ribed in section	cer, director, ibutor, or 35% s (as defined 4958(c)(3)(B)		2 3 4	
Pledges and grants receivable, net Accounts receivable, net Loans and other receivables from any currer trustee, key employee, creator or founder, s controlled entity or family member of any of Loans and other receivables from other disc under section 4958(f)(1)), and persons desc Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or oth basis. Complete Part VI of Schedule D	nt or former office ubstantial contractions these persons qualified persons ribed in section	cer, director, ibutor, or 35% s (as defined 4958(c)(3)(B)	91,061	3 4 5	191,709.
Accounts receivable, net Loans and other receivables from any currer trustee, key employee, creator or founder, s controlled entity or family member of any of Loans and other receivables from other disc under section 4958(f)(1)), and persons descinder section 4958(f)(1), and persons d	nt or former office ubstantial contractions these persons qualified persons ribed in section	cer, director, ibutor, or 35% s (as defined 4958(c)(3)(B)		5	
Accounts receivable, net Loans and other receivables from any currer trustee, key employee, creator or founder, s controlled entity or family member of any of Loans and other receivables from other disc under section 4958(f)(1)), and persons descinder section 4958(f)(1), and persons d	nt or former office ubstantial contractions these persons qualified persons ribed in section	cer, director, ibutor, or 35% s (as defined 4958(c)(3)(B)		5	
Loans and other receivables from any currer trustee, key employee, creator or founder, s controlled entity or family member of any of Loans and other receivables from other disc under section 4958(f)(1)), and persons described and loans receivable, net	nt or former officubstantial contractions these persons qualified persons ribed in section	cer, director, ibutor, or 35% (as defined 4958(c)(3)(B)			
controlled entity or family member of any of Loans and other receivables from other disc under section 4958(f)(1)), and persons described and loans receivable, net	these persons qualified persons ribed in section	s (as defined 4958(c)(3)(B)			
Loans and other receivables from other disc under section 4958(f)(1)), and persons desc Notes and loans receivable, net	qualified persons	s (as defined 4958(c)(3)(B)			
under section 4958(f)(1)), and persons described Notes and loans receivable, net	ribed in section	4958(c)(3)(B)		6	
Notes and loans receivable, net				6	
Inventories for sale or use					
Prepaid expenses and deferred charges Land, buildings, and equipment: cost or oth basis. Complete Part VI of Schedule D				7	
 Land, buildings, and equipment: cost or oth basis. Complete Part VI of Schedule D 				8	
basis. Complete Part VI of Schedule D	or I		7,718	9	5,263.
		_			
b Less: accumulated depreciation		0.			
	10b		0		
Investments - publicly traded securities			1,222,649	• 11	1,556,035.
Investments - other securities. See Part IV, li	ine 11			12	
Investments - program-related. See Part IV,	line 11			13	
Intangible assets				14	
Other assets. See Part IV, line 11			4.60.006	15	4 056 004
Total assets. Add lines 1 through 15 (must			1,468,886		1,876,881.
Accounts payable and accrued expenses			7,304		6,577.
Grants payable				18	
Deferred revenue				19	
Tax-exempt bond liabilities				20	
Escrow or custodial account liability. Comple				21	
Loans and other payables to any current or					
trustee, key employee, creator or founder, s					
controlled entity or family member of any of				22	
Secured mortgages and notes payable to un				23	44 500
				24	44,500.
	lines 17-24). Col	npiete Part X		05	
			7 304		51,077.
			7,304	• 26	JI,077•
	check here	<u> </u>			
			1 408 400	. 27	1,458,216.
					367,588.
Net assets with donor restrictions			33,132	20	307,73001
	oo soo, check i				
Organizations that do not follow FASB AS	nds			29	
Organizations that do not follow FASB AS and complete lines 29 through 33.				-	
Organizations that do not follow FASB AS and complete lines 29 through 33. Capital stock or trust principal, or current full				-	
Organizations that do not follow FASB AS and complete lines 29 through 33. Capital stock or trust principal, or current full Paid-in or capital surplus, or land, building, or	or equipment fui	Paid-in or capital surplus, or land, building, or equipment fund			
Organizations that do not follow FASB AS and complete lines 29 through 33. Capital stock or trust principal, or current full Paid-in or capital surplus, or land, building, or	or equipment fui ed income, or ot		1,461,582	31 • 32	1,825,804.
•	Other liabilities (including federal income tax parties, and other liabilities not included on of Schedule D Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, and complete lines 27, 28, 32, and 33. Net assets without donor restrictions Net assets with donor restrictions Organizations that do not follow FASB AS and complete lines 29 through 33.	Other liabilities (including federal income tax, payables to re parties, and other liabilities not included on lines 17-24). Cor of Schedule D Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. Net assets without donor restrictions Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check hand complete lines 29 through 33. Capital stock or trust principal, or current funds	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. Net assets without donor restrictions Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. Net assets without donor restrictions Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here ▶ X and complete lines 27, 28, 32, and 33. Net assets without donor restrictions Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here ▶ □ and complete lines 29 through 33. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund 30

Form **990** (2019)

Pai	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		5,7	
2	Total expenses (must equal Part IX, column (A), line 25)	2		3,6	
3	Revenue less expenses. Subtract line 2 from line 1	3		2,1	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,46		
5	Net unrealized gains (losses) on investments	5	1	2,0	<u>71.</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	1,82	5,8	04.
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	nedule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	2019)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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. HUNTER COLLEGE HIGH SCHOOL ALUMNAE/I

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Name of the organization ASSOCIATION 13-3953396 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). 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: 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X 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.) 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 33 1/3% 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 33 1/3% 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. 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. control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. ☐ Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Total

Part II Support 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.) Section A. Public Support Calendar 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 1197978 793,070. 846,825 3851591. include any "unusual grants.") 491,247 522,471 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 491,247. 522,471 1197978. 793,070. 846,825 3851591. 4 Total. Add lines 1 through 3 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) 1177543. 2674048. 6 Public support. Subtract line 5 from line 4 Section B. Total Support (a) 2015 491,247. Calendar year (or fiscal year beginning in) **(b)** 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total 522,471 1197978. 3851591. 793,070. 846,825 7 Amounts from line 4 8 Gross income from interest. dividends, payments received on securities loans, rents, royalties, 116. 260 227. 5,166. 15,211. 20,980. and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital 2,051 4,905. 125. 18,297 25,378 assets (Explain in Part VI.) 3897949. 11 Total support. Add lines 7 through 10 164.431. **12** Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 68.60 14 % 14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2018 Schedule A, Part II, line 14 71.53 15 16a 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and ightharpoons Xstop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 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 organization b 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 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 organization

Schedule A (Form 990 or 990-EZ) 2019

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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.)

Sec	qualify under the tests listed be ction A. Public Support	elow, please com	plete Part II.)				
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Gifts, grants, contributions, and	(a) 2015	(b) 2010	(6) 2017	(u) 2016	(e) 2019	(I) Total
'	membership fees received. (Do not						
	include any "unusual grants.")						
2							
2	Gross receipts from admissions, merchandise sold or services per-						
	formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🖊	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	: Add lines 10a and 10b						
	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						
13	assets (Explain in Part VI.)						
	First five years. If the Form 990 is for	the organization'	s first second this	d fourth or fifth t	av voar as a soctio	n 501(c)(3) organia	zation.
		· ·	•		-	. , . ,	Lation,
Sec	ction C. Computation of Publi						
	Public support percentage for 2019 (li			column (f))		15	%
	Public support percentage from 2018					16	
	ction D. Computation of Inves					10	70
	•					17	04
17						18	<u>%</u>
18	Investment income percentage from 2						% 17 is not
198	33 1/3% support tests - 2019. If the						i / is not ⊾
	more than 33 1/3%, check this box ar						P
k	33 1/3% support tests - 2018. If the						
00	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a	00x on line 14, 19	a, or 19b, check t	nis box and see in	structions	P

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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		
3с		
4a		
4b		
4c		
5a		
Sa		
5b		
5c		
6		
7		
8		
9a		
9b		
9с		
10a		
10b		

	dule A (Form 990 of 990-EZ) 2019 11550011111014	3 33333	О Р	19e 3
Pa	t IV Supporting Organizations _(continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	44		
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. tion B. Type I Supporting Organizations	11c		
<u> </u>	tion B. Type i Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		163	140
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion 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			
2	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion 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 yea(see instru	ctions).		
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 <i>below.</i>			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruction	s).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	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.	3a		
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.	3b	1	1

932025 09-25-19

Schedule A (Form 990 or 990-EZ) 2019 ASSOCIATION

Pa	Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orgar	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust on	Nov. 20, 1970 (explain in	Part VI). See instructions. Al
	other Type III non-functionally integrated supporting organizations must co	mplete Se	ections A through E.	
Sect	ion 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		
Sect	ion 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		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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		
Sect	ion 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-functional	y integrat	ed Type III supporting org	ganization (see
	instructions).			

Schedule A (Form 990 or 990-EZ) 2019

Schedule A (Form 990 or 990-EZ) 2019 ASSOCIATION

Par	rt V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations _(continued)	
Secti	ion D - Distributions		Current Year	
1	Amounts paid to supported organizations to accomplish ex			
2	Amounts paid to perform activity that directly furthers exem	pt purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos			
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which to	he organization is responsive	9	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	ion 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			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
С	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if		<u> </u>	
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			
	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

HUNTER COLLEGE HIGH SCHOOL ALUMNAE/I

Schedule A (Form 990 or 990-EZ) 2019 ASSOCIATION 13-3953396 Page 8 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

HUNTER COLLEGE HIGH SCHOOL ALUMNAE/I ASSOCIATION

Employer identification number 13-3953396

Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other	Similar Funds	or Accounts	Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	ne 6.			
		(a) Donor advise	ed funds	(b) Funds ar	nd other accounts
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in	-			
	are the organization's property, subject to the organization's $% \left(1\right) =\left(1\right) \left(1$				L Yes No
6	Did the organization inform all grantees, donors, and donor a				
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for a	ny other purpose o	conferring	
Day	impermissible private benefit?				Yes No
Pai		-		art IV, line 7.	
1	Purpose(s) of conservation easements held by the organization	` ' <u></u>	7		
	Preservation of land for public use (for example, recrea	ation or education)	☐ Preservation of a	• •	
	Protection of natural habitat		☐ Preservation of a	a certified historic	structure
_	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a quality	fied conservation contri	oution in the form o		
	day of the tax year.				at the End of the Tax Year
a	Total number of conservation easements				
b	Total acreage restricted by conservation easements				
	Number of conservation easements on a certified historic str				
d	Number of conservation easements included in (c) acquired				
_	listed in the National Register			2d	
3	Number of conservation easements modified, transferred, re	leased, extinguished, or	terminated by the	organization dur	ng the tax
	year >				
4	Number of states where property subject to conservation ea	_			
5	Does the organization have a written policy regarding the per				□ Vaa □ Na
	violations, and enforcement of the conservation easements i				Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	nandling of violations, a	and enforcing cons	ervation easemei	its during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and o	nforcing concentrat	ion occomente d	ring the year
7	S	uling of violations, and e	inorcing conservat	ion easements u	uring trie year
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requireme	nts of section 170(h)(//)(R)(i)	
Ü	and section 170(h)(4)(B)(ii)?				Yes No
9	In Part XIII, describe how the organization reports conservati				165 140
5	balance sheet, and include, if applicable, the text of the footi		· ·		es the
	organization's accounting for conservation easements.	note to the organization	3 ililariolai staterrie	ins that describe	3 110
Pai	t III Organizations Maintaining Collections o	f Art. Historical Tr	easures, or Ot	her Similar A	ssets.
	Complete if the organization answered "Yes" on Form	-	,		
	If the organization elected, as permitted under FASB ASC 95		venue statement a	nd balance sheet	works
	of art, historical treasures, or other similar assets held for pul	•			
	service, provide in Part XIII the text of the footnote to its final	•	•	•	
b	If the organization elected, as permitted under FASB ASC 95				rks of
	art, historical treasures, or other similar assets held for public				
	provide the following amounts relating to these items:	, ,		•	,
	(i) Revenue included on Form 990, Part VIII, line 1			> \$	
					_
2	If the organization received or held works of art, historical tre				
	the following amounts required to be reported under FASB A			J /1	
а	Revenue included on Form 990, Part VIII, line 1			▶ \$	
	Assets included in Form 990, Part X				

932051 10-02-19

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Schedule D (Form 990) 2019

	t III Organizations Maintaining Co		t Hie	torical Tr	easures o	r Othe	r Simil	ar Asse	ts/continu	ray	C 2
									•	ieu)	
3	Using the organization's acquisition, accession	i, and other record	s, checi	k arry or trie	i lollowing trial	i make s	ignincant	use of its			
	collection items (check all that apply):	_									
а	Public exhibition	d			hange progra	m					
b	Scholarly research	е		Other							
С	Preservation for future generations										
4	Provide a description of the organization's colle	ections and explai	n how th	ney further t	the organization	on's exer	npt purpo	ose in Par	t XIII.		
5	During the year, did the organization solicit or r	receive donations	of art, hi	storical trea	asures, or othe	er similar	assets		_		
	to be sold to raise funds rather than to be main								Yes		No
Par	t IV Escrow and Custodial Arrange	ements. Comple	ete if the	organizatio	on answered "	Yes" on	Form 990), Part IV,	line 9, or		
	reported an amount on Form 990, Part	X, line 21.									
1a	Is the organization an agent, trustee, custodiar	n or other intermed	liary for	contribution	ns or other ass	sets not	included				
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XIII an										
									Amount		
С	Beginning balance						1c				
	Additions during the year										
	Distributions during the year										
f	Ending balance										
	Did the organization include an amount on Form								Yes		No
	If "Yes," explain the arrangement in Part XIII. C						•				
Par											
		(a) Current year		rior year	(c) Two years			ears back	(a) Four	ears h	ack
12	Designing of years belones	` ,	(6)	nor year	(c) Two yours	5 Buok	(a) 111100 y	ouro buon	(C) rour	y out o be	1011
	Contributions					+					
	Net investment earnings, gains, and losses					-					
	Grants or scholarships					+					
е	Other expenditures for facilities										
	and programs										
	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the currer	nt year end balanc	e (line 1	g, column (a)) held as:						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment >	%									
С	Term endowment ▶%										
	The percentages on lines 2a, 2b, and 2c should	d equal 100%.									
3a	Are there endowment funds not in the possess	sion of the organiza	ation tha	at are held a	and administer	red for th	ne organiz	zation			
	by:								[·	Yes I	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations										
b	If "Yes" on line 3a(ii), are the related organization	ons listed as requir	ed on S	chedule R?)				3b		
4	Describe in Part XIII the intended uses of the o								· <u></u>		
Par	t VI Land, Buildings, and Equipme										
	Complete if the organization answered '	"Yes" on Form 990), Part I\	/, line 11a. S	See Form 990	, Part X,	line 10.				
	Description of property	(a) Cost or o			t or other		cumulate	ed	(d) Book	value	
	2000.151.01.01.01.01.01	basis (investn			(other)		reciation		(4, 200	7 01.010	
	Land	`			. ,						
	Buildings										
	Leasehold improvements				+			- -			
					+			- -			
	Equipment							- -			
	Other		V cale	nn /D\ /: :	100)			_			0.
rotal	. Add lines 1a through 1e. (Column (d) must equ	iai ruiiii 990. Part	A. COIUN	ııı (D). IINE	1 UC.1						•

Schedule D (Form 990) 2019

	3 6 6 6 6 7 3 15 7 6 7 7	EGE HIGH SCHO		12 2052206 - 6
	(Form 990) 2019 ASSOCIATION			13-3953396 _{Page} 3
Part VII	Investments - Other Securities.			
() D	Complete if the organization answered "Yes"			
	otion of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or	end-of-year market value
	al derivatives			
(2) Closely	held equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (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 Form 990, Part X, line 13.	
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or	end-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	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 Form 990, Part X, line 15.	
	(a)	Description		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colu	ımn (b) must equal Form 990, Part X, col. (B) lin	e 15.)		>
Part X	Other Liabilities.			
	Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line	e 25.
1.	(a) Description of liability			(b) Book value
(1) Fed	deral income taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

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

Schedule D (Form 990) 2019

Pa					
	Complete if the organization answered "Yes" on Form 990, Part IV				0.5.5
1	Total revenue, gains, and other support per audited financial statements				957,852.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		40.074		
а	Net unrealized gains (losses) on investments		12,071.		
b	Donated services and use of facilities				
С	Recoveries of prior year grants				
d	,	2d			10 051
е	Add lines 2a through 2d			_	12,071.
3	Subtract line 2e from line 1		3	3	945,781.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b				
b	Other (Describe in Part XIII.)	4b			0
С	Add lines 4a and 4b			-	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line				945,781.
Pa	rt XII Reconciliation of Expenses per Audited Financial		Expenses per Re	eturn	•
	Complete if the organization answered "Yes" on Form 990, Part IV		1 .		593,630.
1	Total expenses and losses per audited financial statements				593,630.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	ا م ا			
a	Donated services and use of facilities				
b	Prior year adjustments				
С.	Other losses				
d	,				0.
e	Add lines 2a through 2d			_	593,630.
3	Subtract line 2e from line 1			5	333,030.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	40			
a	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)				
b	Other (Describe in Part Alli.)				
_	A del Proposition Albertain				0.
	Add lines 4a and 4b			_	0. 593 630
5 Pa	A del Proposition Association	e 18.)	5	5	593,630.
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, liner IIII Supplemental Information.	e 18.) nd 4; Part IV, lines 1b	and 2b; Part V, line 4; F	5	593,630.
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, liner XIII Supplemental Information. ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 14.	e 18.) nd 4; Part IV, lines 1b	and 2b; Part V, line 4; F	5	593,630.
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, liner XIII Supplemental Information. ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 14.	e 18.) nd 4; Part IV, lines 1b	and 2b; Part V, line 4; F	5	593,630.
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, liner XIII Supplemental Information. ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 14.	e 18.) nd 4; Part IV, lines 1b	and 2b; Part V, line 4; F	5	593,630.
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, liner XIII Supplemental Information. ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 14.	e 18.) nd 4; Part IV, lines 1b	and 2b; Part V, line 4; F	5	593,630.
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, liner XIII Supplemental Information. ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 14.	e 18.) nd 4; Part IV, lines 1b	and 2b; Part V, line 4; F	5	593,630.
5 Pa Prov	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, liner XIII Supplemental Information. ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 14.	e 18.) nd 4; Part IV, lines 1b	and 2b; Part V, line 4; F	5	593,630.

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

HINTER COLLEGE HIGH SCHOOL ALIMNAF/T

OMB No. 1545-0047 **2019**

Open to Public Inspection

ASSOCIATI		H SCHOOL AL	IOMNAE/I				13-3953396
Part I General Information on Grants a							
 Does the organization maintain records criteria used to award the grants or assi Describe in Part IV the organization's pro 	stance? ocedures for monit	oring the use of grant	funds in the Unite	d States.			X Yes No
Part II Grants and Other Assistance to	_				anization answered "	Yes" on Form 990, Part	t IV, line 21, for any
recipient that received more than 1 (a) Name and address of organization or government	\$5,000. Part II can (b) EIN	be duplicated if addit (c) IRC section (if applicable)	(d) Amount of cash grant	ded. (e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
HUNTER COLLEGE HIGH SCHOOL 71 EAST 94TH STREET							TO SUPPORT VARIOUS
NEW YORK, NY 10128	13-6001027		138,286.	0.			PROGRAMS FOR STUDENTS
 Enter total number of section 501(c)(3) a Enter total number of other organization 							>

Part III can be duplicated if additional space is needed.

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
HOLARSHIP AWARDS	7	5,775.	0.		

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

HCHSAA ANNOUNCES A CALL FOR PROPOSALS TO THE HIGH SCHOOL'S DEPARTMENT

CHAIRS AND ADMINISTRATION TWICE A YEAR, WHICH IS THEN FORWARDED TO FACULTY

AND STAFF, PROPOSALS FOR FUNDING ARE REVIEWED BY A FOUR TO SIX MEMBER BOARD

GRANTS COMMITTEE, WHO REVIEW AND MAKE RECOMMENDATIONS FOR SUPPORT TO THE

BOARD. THE AWARDS ARE ANNOUNCED TO APPLICANTS AND A CHECK IS ISSUED TO THE

HIGH SCHOOL PRINCIPAL. AT THE COMPLETION OF EACH PROJECT A REPORT IS DUE.

MULTI-YEAR PROJECTS REQUIRE INTERIM REPORTS. IF FUNDS ARE NOT EXPENDED AS

OUTLINED IN THE INITIAL REQUEST THE TEACHER OR ADMINISTRATOR IS REQUIRED TO

REQUEST AN EXTENSION OR PERMISSION TO REALLOCATE THE FUNDS. THESE REQUESTS ARE BROUGHT BACK TO THE BOARD FOR A VOTE.	Part IV	Supple	mental I	ntorr	nation	1												
	REQUE	ST AN	EXTENS	SION	OR	PERMI	SSIO	N T	O REA	LLOC	ATE	THE	FUND	s.	THES	E	REQU	JESTS
	ARE B	ROUGHT	BACK	то	THE	BOARD	FOR	A '	VOTE.									
Schedule I (Form 990)																		

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. Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

HUNTER COLLEGE HIGH SCHOOL ALUMNAE/I ASSOCIATION

Employer identification number 13-3953396

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: THE HCHSAA IS DEDICATED TO THE RECRUITMENT, DEVELOPMENT, AND ADVANCEMENT OF THE GIFTED STUDENTS AND ALUMNAE/I OF HUNTER COLLEGE HIGH SCHOOL.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: ASSOCIATION PROVIDED EMERGENCY FUNDING TO THE FOLLOWING PROGRAMS AND ACTIVITIES: ONLINE VISITING ARTISTS PROGRAM, E-TEXT LICENSURE, YOGA CLASSES TO PROMOTE FACULTY WELLNESS, HALLWAYS SOCIAL PROGRAMMING, PEER LEADERSHIP PROGRAM, DEBATE TEAM SUPPORT, AND CONFERENCE PRESENTATION.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: ARCHIVES FOLLOWED BY A POST-EVENT GATHERING AT A NEARBY BAR; A VISIT TO THE NEW-YORK HISTORICAL SOCIETY'S EXHIBITS PAUL REVERE: BEYOND MIDNIGHT AND MARK TWAIN AND THE HOLY LAND WHICH INCLUDED A CONTINENTAL BREAKFAST; A FILM SCREENING OF THE DOCUMENTARY AFTERWARD; AND A TOUR OF THE DC HISTORY CENTER IN WASHINGTON, DC, WHICH WAS FOLLOWED BY A GATHERING AT A NEARBY BAR. VIRTUAL EVENTS, WHICH LAUNCHED IN MARCH 2020, INCLUDED SEVERAL BOOK READINGS, SING-A-LONGS, A PEACE CONCERT, AND PROFESSIONAL ADVICE FOR SMALL BUSINESS OWNERS. OUR SIGNATURE REUNION EVENT WAS HELD VIRTUALLY IN JUNE 2020 AND DREW HUNDREDS OF VIEWERS. A SECOND REUNION EVENT, THE 466 LEXINGTON AVENUE FACULTY/STUDENT REUNION, WAS ALSO HELD AND HAD NEARLY 100 ALUMNAE TAKE PART IN THE GATHERING VIA ZOOM.

THE HCHSAA CONTINUES TO MAINTAIN ITS ONLINE ALUMNI DIRECTORY AND

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

Schedule O (Form 990 or 990-EZ) (2019)

Name of the organization HUNTER COLLEGE HIGH SCHOOL ALUMNAE/I
ASSOCIATION

Employer identification number 13-3953396

WEBSITE (WWW.HCHSAA.ORG). IT PUBLISHED THREE ISSUES OF THE MAGAZINE,

ALUMNOTES, AND EMAILED 12 MONTHLY E-NEWSLETTERS IN FY20 IN ADDITION TO

REGULAR EVENT EMAILS. AN ESTIMATED FORTY FIVE ALUMNAE/I VOLUNTEERS

OFFERED THEIR TIME IN SUPPORT OF OUR PROGRAMS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

SCHOLARSHIPS TO STUDENTS

EXPENSES \$ 5,775. INCLUDING GRANTS OF \$ 5,775. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 1:

THE EXECUTIVE COMMITTEE CONSISTS OF A PRESIDENT, EXECUTIVE VICE PRESIDENT,
VICE-PRESIDENT, TREASURER AND SECRETARY. ALL ARE MEMBERS OF THE BOARD. THE
EXECUTIVE COMMITTEE HAS ALL THE AUTHORITY OF THE BOARD, EXCEPT IN THE
FOLLOWING MATTERS: 1. SUBMISSION TO MEMBERS OF ANY ACTION WITH RESPECT TO
WHICH MEMBERS' APPROVAL IS REQUIRED BY LAW; 2. FILLING VACANCIES IN THE
BOARD OF DIRECTORS OR IN ANY COMMITTEE; 3. FIXING COMPENSATION, IF ANY OF
THE DIRECTORS FOR SERVING ON THE BOARD OR ON ANY COMMITTEE; 4. AMENDING OR
REPEALING THE BY-LAWS OR ADOPTING NEW BY-LAWS; 5. AMENDING OR REPEALING ANY
RESOLUTION OF THE BOARD WHICH BY ITS TERMS CANNOT BE AMENDED OR REPEALED;
OR 6. REMOVING DIRECTORS.

FORM 990, PART VI, SECTION A, LINE 6:

THE ALUMNAE/I ASSOCIATION HAS APPROXIMATELY 2,295 ACTIVE MEMBERS IN FISCAL YEAR 2020. THEY HAVE THE RIGHT TO ELECT THE GOVERNING BODY AT THE ANNUAL MEETING OF MEMBERS HELD EACH YEAR IN JUNE BUT DO NOT HAVE RIGHTS TO APPROVE DECISIONS OF THE GOVERNING BODY OR RECEIVE A SHARE OF THE ORGANIZATION'S PROFITS OR NET ASSETS.

Name of the organization HUNTER COLLEGE HIGH SCHOOL ALUMNAE/I ASSOCIATION

Employer identification number 13-3953396

FORM 990, PART VI, SECTION A, LINE 7A:

THE ORGANIZATION'S MEMBERS HAVE THE RIGHT TO ELECT THE DIRECTORS EACH YEAR.

A SLATE OF NEW AND RENEWING TRUSTEES IS DISTRIBUTED TO MEMBERS IN ADVANCE

OF THE ANNUAL MEETING ALONG WITH PROXY FORMS. MEMBERS HAVE NO OTHER RIGHTS.

FORM 990, PART VI, SECTION B, LINE 11B:

A DRAFT OF THE FORM 990 IS SUBMITTED TO THE AUDIT COMMITTEE FOR THEIR REVIEW BEFORE IT IS FILED.

FORM 990, PART VI, SECTION B, LINE 12C:

EACH BOARD MEMBER FILLS OUT A CONFLICT OF INTEREST AT THE BEGINNING OF THE FISCAL YEAR. THE FORM IS REVIEWED BY THE GOVERNANCE COMMITTEE AND FILED.

FORM 990, PART VI, SECTION B, LINE 15:

THE LAST TIME COMPENSATION WAS REVIEWED FOR THE EXECUTIVE DIRECTOR WAS IN 2018. AT THAT TIME THE EXECUTIVE DIRECTOR DIDN'T RECEIVE A WRITTEN PERFORMANCE REVIEW. THE EXECUTIVE DIRECTOR DID A SELF-REVIEW AND SUBMITTED IT TO THE BOARD. A DISCUSSION WAS HELD IN A CLOSED EXECUTIVE SESSION OF THE BOARD, WHICH WAS NOT DOCUMENTED IN WRITING AND APPROVED UNANIMOUSLY. OTHER STAFF MEMBERS ARE REVIEWED BY THE EXECUTIVE DIRECTOR ON AN ANNUAL BASIS AND COMPENSATION ADJUSTMENTS ARE MADE AT THAT TIME, OR ONCE THE FISCAL YEAR BUDGET IS APPROVED. A SURVEY OF SIMILAR POSITIONS IS USED FOR COMPARATIVE PURPOSES.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.