# **Return of Organization Exempt From Income Tax**

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

Inspection

▶ Do not enter Social Security numbers on this form as it may be made public. ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

A F	or th	e 201	9 calendar year, or tax year begii	nning , 2	.019, a	and ending	1			, 20	
R o	1: :6		C Name of organization				D	Employer id	entifica	ation number	
<b>D</b> C	eck if ap		IRA SOHN CONFERENCE F	OUNDATION, INC.							
	Addre chang		Doing Business As					20-469	4054		
	Name	change	Number and street (or P.O. box if mail is	not delivered to street address)	R	oom/suite		Telephone n			
	Initial	return	1732 1ST AVE			20395	(	646) 43	5 – 00	023	
	Termi	inated	City or town, state or province, country, a	and ZIP or foreign postal code							
	Amen return		NEW YORK, NY 10128				G	Gross receip	ts \$	3,828,	020.
	Applio pendi		F Name and address of principal officer:	EVAN SOHN			H(a	<ul> <li>a) Is this a gro subordinates</li> </ul>		ofor Yes	X No
			1732 1ST AVE20395, NE	W YORK, NY 10128			H(I	Are all subore		luded? Yes	No
I	Tax-ex	empt st	atus: X 501(c)(3) 501(c) (	) <b>◄</b> (insert no.) 4947(a	a)(1) or	527		If "No," atta	ch a list.	(see instructions)	
J	Websi	te: 🕨	WWW.SOHNCONFERENCE.ORG				H(c	c) Group exem	ption nu	mber <b>&gt;</b>	
K	Form o	of orgar	nization: X Corporation Trust	Association Other		L Year of f	formation:	2006 <b>м</b>	State o	of legal domicile:	DE
Pa	ırt I	Sui	mmary								
	1	Briefly	y describe the organization's mission o	r most significant activities: THE	SOH	N CONFE	RENCE	FOUNDA	TIOIT.	1 IS	
e			ICATED TO THE TREATMENT								
an		CHI	LDHOOD DISEASES.								
Governance	2	Check	this box ▶ if the organization d	iscontinued its operations or dis	posed	of more than	 า 25% of	its net asset	s.		
Ĝ	3	Numb	er of voting members of the governing	body (Part VI, line 1a)					3		4.
			er of independent voting members of t						4		4.
Activities &			number of individuals employed in cale						5		3.
ť			number of volunteers (estimate if neces						6		4.
Ac			unrelated business revenue from Part V						7a		0
			nrelated business taxable income from						7b		0
				,				rior Year		Current Ye	ar
	8	Contri	ibutions and grants (Part VIII, line 1h)			——		2,660,23	32.	2,517	,353
Revenue	9	Progra	am service revenue (Part VIII, line 2g)		COPY F	FOR		61,30	04.	76	,226
eve	10	Invest	ment income (Part VIII, column (A), line	es 3, 4, and 7d)	IC INS	PECTION		53,62	27.	73	,063
Ř			revenue (Part VIII, column (A), lines 5,						5.	1	,462
			revenue - add lines 8 through 11 (must					2,775,16	58.	2,668	,104
			s and similar amounts paid (Part IX, colo					L,923,05		2,096	,849
	14		its paid to or for members (Part IX, colu						0.		
w		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)						284,9	73.	114	,808
Expenses			ssional fundraising fees (Part IX, column					121,50	00.		0
bei	b	Total	fundraising expenses (Part IX, column (	D), line 25) <b>&gt;</b>	0.						
ũ			expenses (Part IX, column (A), lines 11					289,12	21.	269	,063
			expenses. Add lines 13-17 (must equal					2,618,64	19.	2,480	,720
	19		nue less expenses. Subtract line 18 fron			• • • • • •		156,51	_		,384
or		110101	Table of the state				Beginnin	g of Current		End of Year	
ets	20	Total	assets (Part X, line 16)					2,980,81		3,115	
Net Assets or Fund Balances			liabilities (Part X, line 26)					76,62			,597
E d			ssets or fund balances. Subtract line 21					2,904,18		3,106	
	rt II		gnature Block					· · ·		,	<u> </u>
			of perjury, I declare that I have examined th	is return, including accompanying so	chedules	s and statem	ents. and	to the best o	f mv kı	nowledge and bel	lief. it is
			complete. Declaration of preparer (other than								
Sig	n		Signature of officer					Date			
Hei	е										
			Type or print name and title								
		_	Type preparer's name	Preparer's signature		Date		Check	if P	TIN	
Paid		JAM		JAMES MULROY		11/09/	/2020	self-employ	J "'	P00024514	
Prep	arer		. LITELLIMONTELL DDOL			1 / 0 / /				2027092	
Use Only			s name WITHUMSMITH+BROW  s address ONE TOWER CENTER BLVD 1		016					-828-1614	
May	the II		ccuss this return with the preparer show		010		Pn	one no.	, , , ,		No
				n above? (see instructions)						X Yes	

IRA SOHN CONFERENCE FOUNDATION, INC.

20-4694054

Form 990 (2019)

Forr	n 990 (2019) Page	<u> 2</u>
Pa	Statement of Program Service Accomplishments	_
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:	
	THE FOUNDATION SUPPORTS CUTTING-EDGE MEDICAL RESEARCH,	
	STATE-OF-THE-ART RESEARCH EQUIPMENT, AND INNOVATIVE PROGRAMS TO	
	ENSURE CHILDREN WITH CANCER SURVIVE AND THRIVE.	
		_
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes   Yes   If "Yes," describe these new services on Schedule O.	lo
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	lo
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to othe the total expenses, and revenue, if any, for each program service reported.	
4a	(Code: ) (Expenses \$ 2,096,849. including grants of \$ 2,096,849. ) (Revenue \$ 76,226. )	_
	THE FOUNDATION WAS ESTABLISHED FOR, BUT NOT LIMITED TO, MEDICAL	_
	RESEARCH RELATED TO AND IN CONNECTION WITH PEDIATRIC CANCER AND	—
	OTHER PEDIATRIC HEALTH CARE CAUSES. THE FOUNDATION ACCOMPLISHES	—
	ITS OBJECTIVES THROUGH THE OPERATION OF ONE FUND-RAISING ACTIVITY THAT TAKES PLACE ONCE A YEAR ENTITILED THE SOHN INVESTMENT	—
	CONFERENCE. THE ATTENDEES AS WELL AS MANY OF THE SPEAKERS ALL	—
	CONTRIBUTE TO THE FOUNDATION THROUGH PLEDGES AND/OR CASH DONATION.	—
	- Indicate in the resolution invocant reports and one crash pownition.	—
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)	
<b>4c</b>	(Code:) (Expenses \$including grants of \$) (Revenue \$)	
4d	Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )  Total program service expenses \$ 2.096.849.	

Form 990 (2019) Page **3** 

IRA SOHN CONFERENCE FOUNDATION, INC.

Par	Checklist of Required Schedules		Yes	No
4	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		res	NO
1	complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	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		X
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,	l _		3.5
•	the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			Х
9	complete Schedule D, Part III	8		
9	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		Х
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		Х
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	l		37
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
ī	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	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		21	
12 a	Schedule D, Parts XI and XII.	12a	X	
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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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			v
47	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	47		Х
18	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		- 22
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	10		
	If "Yes," complete Schedule G, Part III	19		Х
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			
	domestic government on Part IX column (A) line 12 If "Vas " complete Schedule I. Parts I and II.	21	X	

JSA 9E1021 2.000

Page 4

IRA SOHN CONFERENCE FOUNDATION, INC. Form 990 (2019)

Part	t 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			3.5
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
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			v
0.4	employees? If "Yes," complete Schedule J.	23		X
24 a	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	24-		Х
<b>L</b>	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240		
C	to defease any tax-exempt bonds?	24c		
ч	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	240		
254	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	200		
-	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		Х
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		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		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		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			3.5
	complete Schedule N, Part II.	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	_		v
	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,	,		v
25.	or IV, and Part V, line 1	34 35a		X
		33a		71
a	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	330		
50	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	30		
٠.	and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? <b>Note:</b> All Form 990 filers are required to complete Schedule O.	38	Х	
Part		, ,,,,		
	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   12			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	Х	

Form 990 (2019) Page 5

IRA SOHN CONFERENCE FOUNDATION, INC.

2a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax	Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
Statements, filed for the calendar year ending with or within the year covered by this return. 2a 3 2 2 3 2 5 8 1 4 1 least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).  3a Did the organization have unrelated business gross income of \$1,000 or more during he year?.  3b II "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule 0				Yes	No
Statements, filed for the calendar year ending with or within the year covered by this return. 2a 3 2 2 3 2 5 8 1 4 1 least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).  3a Did the organization have unrelated business gross income of \$1,000 or more during he year?.  3b II "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule 0	2a	Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax			
b If at least one is reported on line 2.a, did the organization file all required federal employment tax returns?  Note: If the sum of lines at and 2s is greater than 250, you may be required to effe (see instructions).  3 a Did the organization have unrelated business gross income of \$1.000 or more during the year?  4 At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, socurities account, or other financial accountry).  5 a If Yes, a fine the frame of the foreign country (such as a bank account, socurities account, or other financial accountry).  5 a If Yes is one of the foreign country (such as a bank account, socurities account, or other financial accountry).  5 a If Yes is one of the foreign country (such as a bank account, socurities account, or other financial accountry).  5 a If Yes is one instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5 a If Yes is one in the foreign country (such as a bank account, socurities account, or other financial accountry).  5 a If Yes is one in the foreign country (such as a bank account, socurities account, or other financial accountry).  5 a If Yes if Yes if the organization that it was or is a party to a prohibited tax sheltor transaction?  6 b If Yes, a did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions and services provided to the payor?  5 b If Yes, did the organization excelve a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  5 b If Yes, did the organization excelve a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  6 b If Yes, did the organization excelve a contribution of organization file form \$899 as required?  7 b If Yes, did the organi					
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).  3a	b		2b	X	
3a Dit the organization have unrelated business gross income of \$1,000 or more during the year?.  3b Dif Yes,* has filled a Form 990-fit or this year? If 'M'ro' in the 3b, provide an explanation or Schedule O.  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a barik account, securities account, or other financial account)?.  5b If 'Yes,* either the name of the foreign country ▶  5c Unit of the organization and the foreign of the foreign of the year of the foreign of the year?  5c Unit of the organization and the organization that it was or is a party to a prohibited tax sheller transaction?  5c Unit 'Yes' to line Saor 5b, did the organization file Form 8886-7?  6c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that ware not tax deductible as charitable contributions?  6c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that ware not tax deductible as charitable contributions?  6c Does the organization include with every solicitation an express statement that such contributions or giffs were not tax deductible?  6c Does the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?  6c Did the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided?  6c Did the organization foreive a benefit excess provided to the payor?  7d If 'Yes,' did the organization notify the donor of the value of the goods or services provided?  9d If 'Yes,' did the organization foreive a contribution of undersological property did the googanization services are contributed on year therewise the organization foreive a contribution of undersological property. If the organization receive any funds,					
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O, over a financial account in a foreign country (such as a bank account, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  b If "Yes," enter the name of the foreign country ► See instructions for filing requirements for FICEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5a Was the organization a party to a prohibited tax shetter transaction at any time during the tax year?  5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shetler transaction of a prohibited tax shetler transaction at any time during the tax year?  5c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions?  6c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7c Organizations that may receive deductible contributions under section 170(c).  8d Did the organization setup a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  7d If Yes," did the organization notify the donor of the value of the goods or services provided?  7d If Yes, and the organization notify the donor of the value of the goods or services provided?  7d If Yes, and the organization received a contribution of qualified intellectual property, did the organization file form 8398 as required?  7d If If Yes, and the organization received a contribution of qualified intellectual property, did the organization file a Form 1094.  8 Sponsoring organization make any taxable distributions under section 4966?  9 Sponsoring organization make any taxable distributions under section 4966?  9 Sponsoring organization make any taxable distribution to a donor,	3a		3a		X
4a A tany time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country, seuch as a bank account, securilies account, or other financial accountry.  b If "Yes," enter the name of the foreign country ▶  See instructions for filing requirements for FrCEN Form 114, Report of Foreign Bank and Financial Accountrs (FBAR).  5a Was the organization party to a prohibited tax shelter transaction at any time during the tax year?  c If "Yes' to line \$a or \$b, did the organization that it was or is a party to a prohibited tax shelter transaction?  6c 10 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?  7 b If "Yes," did the organization notify the donor of the value of the goods or services provided?  7 b If "Yes," did the organization notify the donor of the value of the goods or services provided?  8 b If "Yes," did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  9 b If "Yes," did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  10 bid the organization received a contribution of qualified intellectual property, did the organization flee a Form 1098-C7.  11 bid the organization received a contribution of qualified intellectual property, did the organization flee a Form 1098-C7.  12 Sponsoring organization make any taxable distributions under section 4966?  13 Sponsoring organization make any taxable dis		-	3b		
a financial account in a foreign country (such as a bank account, securities account, or other financial account)?.  4 a					
b if "Yes." enter the name of the foreign country P See instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?.  5b Did any taxable party notify the organization that if was or is a party to a prohibited tax shelter transaction?  6b Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  6c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  6c Did the organization that may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  7a X  7b If "Yes," did the organization notify the donor of the value of the goods or services provided?  7b If "Yes," indicate the number of Forms 8282 filed during the year  7c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? filed during the year  7c Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  7f Did the organization received a contribution of directly or indirectly, to pay premiums on a personal benefit contract?  7f Did the organization feed and contribution of qualified intellectual property, did the organization free required?  7g If the organization received a contribution of qualified intellectual property, did he organization free required to maintaining donor advised funds.  8 Did the sponsoring organization make a distribution to a donor, donor advised fund maintained by the sponsoring organization make a any taxable dist			4a		X
See instructions for filing requirements for FnCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?	b				
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?					
c If "Yes" to line 5a or 5b, did the organization file Form 8886-17  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  b If "Yes," did the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 82827  d If "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization received a contribution of qualified intellectual property, did the organization file Form 8898 as required to All the organization received a contribution of cars, boats, anipanes, or other vehicles, did the organization file Form 8898 as required to All the organization received a contribution of cars, boats, anipanes, or other vehicles, did the organization file Form 8898 as required to All the organization received a contribution of cars, boats, anipanes, or other vehicles, did the organization file Form 8899 as required to All the organization received a contribution of cars, boats, anipanes, or other vehicles, did the organization file Form 8899 as required to a contribution of cars, boats, anipanes, or other vehicles, did the organization file Form 8899 as required to a contribution of cars, boats, anipanes, or other vehicles, did the organization file Form 8899 as required to All the organizations maintaining donor advised funds.  a Did	5a		5a		X
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  b if "Yes," did the organization include with every solicitation an express statement that such contributions or offits were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  8 Dif "Yes," did the organization notify the donor of the value of the goods or services provided?  9 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  10 If "Yes," indicate the number of Forms 8282 filed during the year.  11 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  12 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8998 as required?  12 If the organization received a contribution of qualified intellectual property, did the organization file Form 1098-C?.  13 Sponsoring organization have excess business holdings at any time during the year?  14 Sponsoring organization make any taxable distributions under section 4966?  15 Section 501(c)(7) organizations make a distribution to a donor, donor advisor, or related person?  16 Did the sponsoring organization make any taxable distributions under section 4966?  17 Section 501(c)(7) organizations. Enter:  18 Initiation fees and capital contributions included on Part VIII, line 12  19 Gross receipts, included on Form 990, Part VIII, line 12  10 Gross receipts, included on Form 990, Part VIII, line 12  10 Gross receipts, included on Form 990, Part VIII, line 12  11 Did Section 501(c)(12) organizations in sequiration in sequiration in the organization in the organization in the mature of tax	b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
organization solicit any contributions that were not tax deductible as charitable contributions?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  b If "Yes," did the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year.  e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization received a contribution of qualified intelectual property, did the organization file form 889 as required?  h If the organization received a contribution of qualified intelectual property did the organization file Form 889 as required?  7 If X  8 Sponsoring organizations maintaining donor advised funds.  a Did the sponsoring organization make any taxable distributions under section 4966?  9 Sponsoring organization make any taxable distribution sunder section 4966?  9 Did the sponsoring organization make any taxable distribution sunder section 4966?  9 Section 501(c)(27) organizations. Enter:  10 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  11 Section 501(c)(27) organizations maintaining donor advised funds.  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12 Section 501(c)(27) organizations in formation the organization in formation the organiza	С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  8 Dif "Yes," did the organization notify the donor of the value of the goods or services provided?  9 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  9 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  9 Did the organization received a contribution of qualified intellectual property, did the organization file form 8898 as required?  10 Did the organization received a contribution of oars, boats, airplanes, or other vehicles, did the organization file Form 1098-C?  11 Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds.  12 Did the sponsoring organization make a distribution sunder section 4966?  13 Did the sponsoring organization make any taxable distributions under section 4966?  14 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  15 Did the sponsoring organizations. Enter:  16 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  17 Did Section 501(c)(27) organizations. Enter:  18 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  19 Dif "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b  10 Did the organization is licensed to issue qualified health plans in more than one state?  10 Did the organization is licensed to issue qualified health plans in more than one state?  10 Did the organization subject to the section 4960	6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  9 Dif "Yes," did the organization self, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  10 If "Yes," indicate the number of Forms 8282 filed during the year  10 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  11 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  12 Did the organization during the year, pay premiums, directly or indirectly, on a personal benefit contract?  13 Did the organization received a contribution of qualified intellectual property, did the organization file Form 889 as required?  14 If the organization received a contribution of oars, boats, airplanes, or other vehicles, did the organization file Form 889 as required?  15 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  15 Sponsoring organizations maintaining donor advised funds.  16 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  17 Did  18 Section 501(c)(17) organizations. Enter:  19 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10 Did  10 Section 501(c)(12) organizations. Enter:  10 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).  11 Section 501(c)(2) organizations with the alth insurance issuers.  12 Section 501(c)(12) organizations is required to maintain by the states in which the organization licensed to issue qualified health plans in more than one state?  12 Section 501(c)(2) organization		organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  b If "Yes," id the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d If "Yes," in indicate the number of Forms 8282 filed during the year  e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?.  8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds.  a Did the sponsoring organization have excess business holdings at any time during the year?  9 Sponsoring organization make any taxable distributions under section 4966?  b Did the sponsoring organization make any taxable distributions under section 4966?  b Gross receipts, included on Form 990, Part VIII, line 12.  b Gross receipts, included on Form 990, Part VIII, line 12.  b Gross receipts, included on Form 990, Part VIII, line 12.  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  11b		gifts were not tax deductible?	6b		
and services provided to the payor?  b If "Yes," did the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  f Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  f If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?  Sponsoring organization make any taxable distributions under section 4966?  b Did the sponsoring organization make any taxable distributions under section 4966?  b Did the sponsoring organization make any taxable distributions under section 4966?  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  b Gross income from members or shareholders.  b Gross income from members or shareholders.  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.).  12a Section 501(c)(2) organizations. Enter:  a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.).  12b If "Yes," enter the amount of tax-exempt interest received or accrued during the year .  15b If "Yes," enter the amount of tax-exempt interest received or accrued during the year .  15c Enter the amount of reserves the organization is required to maintain by the states in which the organizat					
b If "Yes," did the organization notify the donor of the value of the goods or services provided?  7b X  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h If the organization received a contribution of a divised funds.  Sponsoring organizations maintaining donor advised funds.  Sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Did the sponsoring organizations. Enter:  Gross income from members or shareholders.  Did gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Did Section 501(c)(12) organizations. Enter:  Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  11a  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  12b  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  12a  If I a la l	а				
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year					
d if "Yes," indicate the number of Forms 8282 filed during the year			7b	X	
d if "Yes," indicate the number of Forms 8282 filed during the year	С		_		v
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds.  9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make any taxable distributions under section 4966?  9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10 Dib  10 Section 501(c)(12) organizations. Enter: a Gross income from embers or shareholders  b Gross income from members or shareholders  b Gross income from members or shareholders  b If "Yes," enter the amount of tra-exempt interest received or accrued during the year  11	_		/C		Λ
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7.		v
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 8899 as required?  7 h   The organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 1098-C?.  8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds.  a Did the sponsoring organizations maintaining donor advised funds.  a Did the sponsoring organization make any taxable distributions under section 4966?  b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  b Did the sponsoring organizations included on Part VIII, line 12  lob Gross receipts, included on Form 990, Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  b Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  112a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  12b If "Yes," enter the amount of reserves the organization is required to maintain by the states in which the organization licensed to issue qualified health plans in more than one state?  Note: See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.  13a	_				
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.  8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?.  8 Sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?.  9 Did the sponsoring organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12.  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.  b Gross income from members or shareholders.  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).  11a  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	†				21
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	g				
Sponsoring organization have excess business holdings at any time during the year?			7 11		
9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12. b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders. b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.).  11a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	0		8		
a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Gross income from embers or shareholders.  B Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  11a  12a  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	9				
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9a		
Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12			9b		
a Initiation fees and capital contributions included on Part VIII, line 12					
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	а	Initiation fees and capital contributions included on Part VIII, line 12			
a Gross income from members or shareholders	b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		Section 501(c)(12) organizations. Enter:			
against amounts due or received from them.)	а	Gross income from members or shareholders			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	b				
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year					
13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note: See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			12a		
a Is the organization licensed to issue qualified health plans in more than one state?  Note: See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		· · · · · · · · · · · · · · · · · · ·			
Note: See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			40-		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	а		13a		
the organization is licensed to issue qualified health plans		·			
c Enter the amount of reserves on hand	b				
14a Did the organization receive any payments for indoor tanning services during the tax year?	_				
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O			142		X
Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?					
excess parachute payment(s) during the year?					
If "Yes," see instructions and file Form 4720, Schedule N.  16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?  16 X			15		Х
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?					
to the enganization an educational methation caspect to the decident record tax on her investment income.	16		16		X
		· · · · · · · · · · · · · · · · · · ·			

Form **990** (2019)

IRA SOHN CONFERENCE FOUNDATION, INC.

4 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

Saat	ion A. Coverning Rody and Management			21
Seci	ion A. Governing Body and Management		Yes	No
			162	NO
1a	Enter the number of voting members of the governing body at the end of the tax year			
	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			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		Х
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 year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
_	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
~	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13 </i>	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
-	rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	Х	
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 approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
9	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a				
100	with a taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ ATTACHMENT 1			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-7	(Sec	tion 5	01(c)
. •	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	,550		3.(0)
	Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of	f inter	est r	oolicv
	and financial statements available to the public during the tax year.		20. F	. Citoy,
20	State the name, address, and telephone number of the person who possesses the organization's books and record MICHAEL ANASTASIO C/O GARWOOD EVENTS, 225 W 106TH ST NEW YORK, NY 10025 917-780-2586	ls ▶		
-	MICHAEL ANASTASIO C/O GARWOOD EVENTS, 225 W 106TH ST NEW YORK, NY 10025 917-780-2586			

Form **990** (2019)

IRA SOHN CONFERENCE FOUNDATION, INC. 20-4694054 Form 990 (2019) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, **Independent Contractors** 

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

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

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

Check this box if neither the organization nor  (A)  Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)  Officer in dividual trust					one an ee)	(D)  Reportable compensation from the organization (W-2/1099-MISC)	(E)  Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
			Ď			ated				
(1) LAUREN BRESLOW	40.00									
EXECUTIVE DIRECTOR	0.			Х				55,385.	0.	0
(2) DANIEL NIR	2.00									
PRESIDENT	0.	Х		Х				0.	0.	0
(3) DOUGLAS HIRSCH	2.00									
CO-FOUNDER & CHAIR EMERITUS	0.	Х		Χ				0.	0.	0
(4) EVAN SOHN	2.00									
VICE PRESIDENT/TREASURER	0.	Х		Х				0.	0.	0
(5) GRAHAM DUNCAN	2.00									
CEO AND CHAIR	0.	Х		Χ				0.	0.	0
(6)										
(7)										
_(1)										
(8)										
(9)										
(10)										
(11)										
(12)										
7/										
(13)										
. ,		l								

Form **990** (2019)

9E1041 2.000

JSA

IRA SOHN CONFERENCE FOUNDATION, INC. R ang Form 990 (2019)

_	rt VII Section A. Officers, Directors, Tru	ustees, Ke	y En	nplo	ye	es, a	and F	lig	hest Compensat	ed Employ	ees (c	ontinue	<u>d)</u>	age C
	(A)	(B)		•		C)			(D)	(E)	Ì		(F)	
	Name and title	Average				ition			Reportable	Reportat		Es	timated	
		hours per week (list any	,				than o is both		compensation from	compensatio related			ount of other	
		hours for	office		dad		or/trust	ee)	the	organizati			pensation	on
		related	Individual trustee or director	Insti	Officer	Key	High	Former	organization	(W-2/1099-I	MISC)		m the	_
		organizations below dotted	director	tutic	er	emp	lest	ner	(W-2/1099-MISC)			•	anizatio I related	
		line)	or tru	nal t		Key employee	com					orga	nizatior	ns
			stee	Institutional truste		Ф	pens							
				ee			Highest compensated employee							
		<del> </del>												
		<del> </del>												
		<del></del>												
	Sub-total Sub-total								55,385.		0.			0.
	Total from continuation sheets to Part VII, S							•	0.		0.			0.
	Total (add lines 1b and 1c)	-						<b>•</b>	55,385.		0.			0.
	Total number of individuals (including but not	limited to t		liste	d al	bove	e) who	re	eceived more than	\$100,000 o	f			
	reportable compensation from the organization	n ▶	0 .											
													Yes	No
3	Did the organization list any former offic													v
	employee on line 1a? If "Yes," complete Schede											3		X
4	For any individual listed on line 1a, is the	sum of rep	ortab	ole c	om	pen	sation	n ai	nd other compens	sation from	the			
	organization and related organizations graindividual								complete Schedu	le J for s	ucn	4		Х
5	Did any person listed on line 1a receive or	accrue co	mpen	sati	on f	from	any							
_	for services rendered to the organization? If "Ye	es," comple	te Scl	nedu	ıle J	l for	such	per	son			5		X
	ction B. Independent Contractors				4			4			000 -4			
1	Complete this table for your five highest com compensation from the organization. Report c year.													
	(A) (B) (C)													
	Name and business add	dress						1	Description of se	ervices	C	ompens	ation	

ATTACHMENT 2

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ 3

Form **990** (2019)

Page 9

IRA SOHN CONFERENCE FOUNDATION, INC.

Part VIII Statement of Revenue

(B) (C) Total revenue Related or exempt Unrelated Revenue excluded function revenue business revenue from tax under sections 512-514 Contributions, Gifts, Grants and Other Similar Amounts Membership dues c Fundraising events 1c 2,189,196 Government grants (contributions) . . All other contributions, gifts, grants, and similar amounts not included above ... 328,157 1f g Noncash contributions included in 105,916 lines 1a-1f. 1g Total. Add lines 1a-1f 2,517,353 **Business Code** Program Service Revenue CONFERENCE REVENUE 611430 76,226 76,226. b d е All other program service revenue 76,226. Total. Add lines 2a-2f Investment income (including dividends, interest, and 68,974. 68,974 0. 4 Income from investment of tax-exempt bond proceeds . 5 0. (i) Real (ii) Personal Gross rents 6a **b** Less: rental expenses 6b Rental income or (loss) 6c d Net rental income or (loss) . . Gross amount from (i) Securities (ii) Other sales of assets 109,005. other than inventory 7a b Less: cost or other basis Other Revenue 7b 104,916. and sales expenses 4,089. c Gain or (loss) . . . . 7c 4.089 4.089 d Net gain or (loss) 8a Gross income from fundraising 2,189,196. events (not including \$ \_ of contributions reported on line 1,055,000 1c). See Part IV, line 18 8a 1,055,000 8b **b** Less: direct expenses 0. c Net income or (loss) from fundraising events. 9a Gross income from gaming 0. activities. See Part IV, line 19 0. 9b **b** Less: direct expenses 0. c Net income or (loss) from gaming activities.  $\triangleright$ Gross sales of inventory, 10a 0. returns and allowances 0. b Less: cost of goods sold . . . . . . . . . 10b Net income or (loss) from sales of inventory 0. **Business Code** Miscellaneous MISCELLANEOUS REVENUE 900099 1,462 1,462 Revenue 11a b All other revenue 1,462 Total, Add lines 11a-11d Total revenue. See instructions 2,668,104. 76,226 74.525. 12

JSA 9E1051 2.000

Page **10** 

# 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).

	Check if Schedule O contains a response or note to any line in this Part IX										
Do	not include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)						
	9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses						
	Grants and other assistance to domestic organizations		5.1p 5.1.055	general superiors							
•	and domestic governments. See Part IV, line 21	2,039,356.	2,039,356.								
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0.									
•	Grants and other assistance to foreign										
3	organizations, foreign governments, and foreign										
	individuals. See Part IV, lines 15 and 16	57,493.	57,493.								
4	Benefits paid to or for members	0.									
5											
3	trustees, and key employees	55,385.		55,385.							
6	Compensation not included above to disqualified			,							
•	persons (as defined under section 4958(f)(1)) and										
	persons described in section 4958(c)(3)(B)	0.									
7	Other salaries and wages	49,819.		49,819.							
	Pension plan accruals and contributions (include	,		,							
U	section 401(k) and 403(b) employer contributions)	0.									
9	Other employee benefits	551.		551.							
10	Payroll taxes	9,053.		9,053.							
	Fees for services (nonemployees):										
	Management	0.									
	Legal	2,825.		2,825.							
	Accounting	97,656.		97,656.							
	Lobbying	0.									
	Professional fundraising services. See Part IV, line 17	0.									
	Investment management fees	0.									
	Other. (If line 11g amount exceeds 10% of line 25, column										
	(A) amount, list line 11g expenses on Schedule O.)	16,367.		16,367.							
12	Advertising and promotion	0.									
13	Office expenses	14,520.		14,520.							
14	Information technology	6,992.		6,992.							
15	Royalties	0.									
16	Occupancy	0.		1 700							
17	Travel	1,700.		1,700.							
18	Payments of travel or entertainment expenses										
	for any federal, state, or local public officials	0.									
19	Conferences, conventions, and meetings	0.									
20	Interest	0.									
21	Payments to affiliates	0.									
22	Depreciation, depletion, and amortization	4,697.		4,697.							
23	Insurance	4,097.		4,097.							
24	Other expenses. Itemize expenses not covered										
	above (List miscellaneous expenses on line 24e. If										
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)										
_	PUBLIC RELATIONS	37,403.		37,403.							
u	MERCHANT ACCOUNT FEES	29,004.		29,004.							
~	FREELANCE DESIGNER	28,995.		28,995.							
_	REGISTRATION AND FILING FEES	18,389.		18,389.							
	All other expenses	10,515.		10,515.							
	Total functional expenses. Add lines 1 through 24e	2,480,720.	2,096,849.	383,871.							
_	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)	0.									
					Form <b>990</b> (2019)						

Form 990 (2019) Page **11** 

IRA SOHN CONFERENCE FOUNDATION, INC.

# Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	art X		X
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	0.	1	0.
	2	Savings and temporary cash investments	806,841.	2	742,050.
	3	Pledges and grants receivable, net	0.	3	8,500.
	4	Accounts receivable, net	48,945.	4	0.
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	0.	5	0.
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0.	6	0.
ţ	7	Notes and loans receivable, net	0.	7	0.
Assets	8	Inventories for sale or use	0.	8	0.
As	9	Prepaid expenses and deferred charges ATCH . 3	49,618.	9	216,562.
	_	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b	0.	10c	0.
	11	Investments - publicly traded securities	2,075,406.	11	2,147,956.
	12	Investments - other securities. See Part IV, line 11	0.	12	0.
	13	Investments - program-related. See Part IV, line 11.	0.	13	0.
	14	Intangible assets	0.	14	0.
	15	Other assets. See Part IV, line 11	0.	15	0.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	2,980,810.	16	3,115,068.
	17	Accounts payable and accrued expenses	19,129.	17	8,597.
	18	Grants payable	0.	18	0.
	19	Deferred revenue	57,500.	19	0.
	20	Tax-exempt bond liabilities.	0.	20	0.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0.	21	0.
ro.	22	Loans and other payables to any current or former officer, director,		21	
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
ij		controlled entity or family member of any of these persons	0.	22	0.
Ë	23	Secured mortgages and notes payable to unrelated third parties	0.	23	0.
	24	Unsecured notes and loans payable to unrelated third parties	0.	24	0.
	25	Other liabilities (including federal income tax, payables to related third	<u> </u>	24	
	23	parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	0.	25	0.
	26	Total liabilities. Add lines 17 through 25	76,629.	26	8,597.
	20	Organizations that follow FASB ASC 958, check here ► X	, 0 , 0 2 3 .	20	3,33.1
Çes		and complete lines 27, 28, 32, and 33.			
lan	27	Net assets without donor restrictions	2,579,181.	27	3,106,471.
Ba	28	Net assets with donor restrictions.	325,000.	28	0.
Б	-0	Organizations that do not follow FASB ASC 958, check here ▶	323,000.	20	<u> </u>
Net Assets or Fund Balances		and complete lines 29 through 33.			
s o	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
As	31	Retained earnings, endowment, accumulated income, or other funds		31	
et	32	Total net assets or fund balances	2,904,181.	32	3,106,471.
_Z	33	Total liabilities and net assets/fund balances	2,980,810.	33	3,115,068.
					Form <b>990</b> (2019)

Form **990** (2019)

IRA SOHN CONFERENCE FOUNDATION, INC.

-om 98	90 (2019)				Pag	ge IZ			
Part	XI Reconciliation of Net Assets								
	Check if Schedule O contains a response or note to any line in this Part XI								
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2	2,66	8,1	04.			
2	Total expenses (must equal Part IX, column (A), line 25)	2	2	2,480,720.					
3	Revenue less expenses. Subtract line 2 from line 1	3		18	7,3	84.			
4									
5	Net unrealized gains (losses) on investments	5		1	4,9	06.			
6	Donated services and use of facilities	6				0.			
7	Investment expenses	7				0.			
8	Prior period adjustments	8				0.			
9	Other changes in net assets or fund balances (explain 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	3	3,10	6,4	71.			
Part									
	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," e	xplain i	in						
	Schedule O.	•							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?.		2	2a		Х			
	If "Yes," check a box below to indicate whether the financial statements for the year were cor								
	reviewed on a separate basis, consolidated basis, or both:								
	Separate basis Consolidated basis Both consolidated and separate basis								
h	Were the organization's financial statements audited by an independent accountant?		2	2b	Х				
D	If "Yes," check a box below to indicate whether the financial statements for the year were audi								
	separate basis, consolidated basis, or both:	tou on	۵						
	X Separate basis Consolidated basis Both consolidated and separate basis								
_	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	areight (	of						
·	the audit, review, or compilation of its financial statements and selection of an independent accounta	•		2c	Х				
	If the organization changed either its oversight process or selection process during the tax year, e								
	Schedule O.	λριαιί Ο	"						
2 ~	As a result of a federal award, was the organization required to undergo an audit or audits as set fo	rth in th							
эā	Single Audit Act and OMB Circular A-133?	iui III (f)		Ва		Х			
<b>ل</b>	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo	lorgo th	• • 🗀	+					
Ö	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a	_		3b					
	required addit of addits, explain why off schedule of and describe any steps taken to undergo such a	uulla	J	,,,,					

Form **990** (2019)

20-4694054

#### **SCHEDULE A** (Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047 Open to Public

Department of the Treasury

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

IIICI	iai ixc	everide Service	,g.					inspection						
		he organization					Employer identif							
		OHN CONFERENCE FOUN				41.1	20-46940							
Pa		Reason for Public Cha					<u> </u>	<b>3.</b>						
	org	anization is not a private fou			_	-	•							
1		A church, convention of ch												
2				on 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) hospital service organization described in section 170(b)(1)(A)(iii).										
3 4		-	•	_				Viii) Enter the						
4		hospital's name, city, and s	=	ion operated in conjunction with a hospital described in <b>section 170(b)(1)(A)(iii).</b> Enter the										
5				r the benefit of a college or university owned or operated by a governmental unit described in										
•		section 170(b)(1)(A)(iv). (0												
6		A federal, state, or local go	• •	rnmental unit describe	d in <b>sect</b>	ion 170(	b)(1)(A)(v).							
7	X	An organization that norm	_			-		om the general public						
-		described in section 170(b	=	•		J a go		om me general paon						
8		A community trust describe			Part II.)									
9		An agricultural research or				operated	in conjunction with a	land-grant college						
		or university or a non-land-	-			-	-	_						
		university:												
10		An organization that normal receipts from activities rela support from gross invests acquired by the organization	ated to its exempt finent income and u	functions - subject to on nrelated business tax	certain e able incc	xceptions me (less	s, and (2) no more that s section 511 tax) from	an 331/3% of its						
11		An organization organized												
12		An organization organized	and operated exclu	usively for the benefit	of, to pe	erform th	e functions of, or to	carry out the purposes						
		of one or more publicly su	ipported organizati	ions described in sect	ion 509	(a)(1) or	section 509(a)(2).	See section 509(a)(3).						
		Check the box in lines 12a	through 12d that d	escribes the type of s	upporting	g organiz	ation and complete li	nes 12e, 12f, and 12g.						
а		Type I. A supporting org	anization operated	, supervised, or contr	olled by	its suppo	orted organization(s),	typically by giving						
		the supported organization	on(s) the power to	regularly appoint or e	lect a ma	ajority of	the directors or truste	es of the						
	_	_ supporting organization.	You must complet	te Part IV, Sections A	and B.									
b		☐ Type II. A supporting org	•				· · ·							
		control or management of		=	the sam	e person	s that control or mar	nage the supported						
		_ organization(s). <b>You mus</b> t	=											
С	L							lly integrated with,						
		its supported organization												
d		Type III non-functionally												
		that is not functionally into requirement (see instruct	-		-		•	d an attentiveness						
е		Check this box if the orga	•	-				II Type III						
C		functionally integrated, or						п, туре ш						
f	En	ter the number of supported				or garnzan								
g		ovide the following informati	•											
	(i) N	ame of supported organization	(ii) EIN	(iii) Type of organization		organization	(v) Amount of monetary	(vi) Amount of						
				(described on lines 1-10 above (see instructions))		ur governing ment?	support (see instructions)	other support (see instructions)						
				above (dec mendenens))	Yes									
(A)														
(B)														
(C)														
(D)														
(D)														
			1	I	Ì			1						

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

Schedule A (Form 990 or 990-EZ) 2019

(E)

Total

Schedule A (Form 990 or 990-EZ) 2019

IRA SOHN CONFERENCE FOUNDATION, INC.

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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 (c) 2017 (e) 2019 Calendar year (or fiscal year beginning in) (a) 2015 (b) 2016 (d) 2018 (f) Total Gifts, grants, contributions, and membership fees received. (Do not 3,769,793 3,626,784 3,894,609 2,721,536 2,593,579 16,606,301. include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid 0. to or expended on its behalf The value of services or facilities furnished by a governmental unit to the 0. organization without charge 3,769,793. 3,626,784. 3,894,609. 2,721,536. 2,593,579 16,606,301. Total. Add lines 1 through 3 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 1,565,064. shown on line 11, column (f) Public support. Subtract line 5 from line 4 15,041,237. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total 3,769,793. 3,626,784 3,894,609 2,721,536 2,593,579 16,606,301. Amounts from line 4 Gross income from interest, dividends. payments received on securities loans. rents, royalties, and income from 56,171. 64,511. 43,273. 58,404 291,333. similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 0. 10 Other income. Do not include gain or loss from the sale of capital assets 1.462 101,553. (Explain in Part VI.) ATCH 1 16,999,187. 11 Total support. Add lines 7 through 10 . . 12 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) Section C. Computation of Public Support Percentage 88.48% Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)). . . . . . . . 93.75% 16a 331/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this b 331/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 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 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.

JSA

Schedule A (Form 990 or 990-EZ) 2019 Page 3

IRA SOHN CONFERENCE FOUNDATION, INC.

#### 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.)

Sac	tion A. Public Support	my drider the		5.0 II, p.0000 00	mpioto i dit i	,	
	ndar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total
	Gifts, grants, contributions, and membership fees	(4) 2010	(3) 2010	(0) 2017	(4) 2010	(0) 2010	(i) rotai
1	,						
2	received. (Do not include any "unusual grants.")  Gross receipts from admissions, merchandise						
-	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	· · · ·						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the						
4	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
o o							
	furnished by a governmental unit to the						
_	organization without charge						
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and 3						
h	received from disqualified persons						
b	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b.						
8	Public support. (Subtract line 7c from						
	line 6.)						
	tion B. Total Support	(-) 0045	(h) 0040	(-) 0047	(-1) 0040	(-) 0040	(f) T-4-1
aleı	ndar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total
9	Amounts from line 6						
υa	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties, and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
1	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on _						
2	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
3	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for	ŭ	· ·		•		` ` ` `
	organization, check this box and stop here.						<u> ▶                         </u>
ec	tion C. Computation of Public Supp		_				
5	Public support percentage for 2019 (line 8,		•			15	%
6	Public support percentage from 2018 Scheo					16	%
ec	tion D. Computation of Investment	Income Per	centage				
7	Investment income percentage for 2019 (lin		•			17	%
8	Investment income percentage from 2018 S					18	%
9 a	331/3% support tests - 2019. If the org	ganization did r	not check the bo	ox on line 14, an	nd line 15 is m	ore than 331/3	3%, and line
	17 is not more than 331/3 %, check this	s box and <b>sto</b>	<b>p here.</b> The org	anization qualifies	as a publicly	supported org	anization . 🕨 🔃
b	331/3% support tests - 2018. If the orga	nization did no	t check a box on	line 14 or line 1	9a, and line 16	is more than	331/3 %, and
	line 18 is not more than 331/3 %, check	this box and s	top here. The or	ganization qualifie	es as a publicly	supported org	anization 🕨
20	Private foundation If the organization d	id not chack	a hov on line 1	/ 10a or 10h	check this how	and con inct	ructions

Schedule A (Form 990 or 990-EZ) 2019 Page 4

#### 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.)

ecti	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	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.	3a		
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 <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3с		
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.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	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 <b>Part VI</b> 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.	4c		
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 <b>Part VI</b> , 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).	5a		
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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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.	6		
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).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	8		
9a	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).  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 <b>Part VI</b> .	9a		
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? <i>If "Yes," provide detail in Part VI.</i>	9b		
С				

10b Schedule A (Form 990 or 990-EZ) 2019

9c

10a

determine whether the organization had excess business holdings.)

supporting organizations)? If "Yes," answer 10b below.

from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

10 a 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

b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

IRA SOHN CONFERENCE FOUNDATION, INC.

Schedu	le A (Form 990 or 990-EZ) 2019		F	Page <b>5</b>
Part	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	1	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 <b>Part VI.</b> on B. Type I Supporting Organizations	11c		
Secu	bir B. Type i Supporting Organizations		Yes	No
			162	NO
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in <b>Part VI</b> 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 <b>Part</b>			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
	71 11 0 0		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 <b>Part VI</b> how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			•
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior			
	tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of			
	the organization's governing documents in effect on the date of notification, to the extent not previously			
	provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's			
	supported organizations played in this regard.	3		
	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	structi	ons).	
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	Yes	
2	Activities Test. Answer (a) and (b) below.		162	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.	20		
		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 <b>Part VI</b> the			
	reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	26		
_	·	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	20		
J-	trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If</i> "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

Schedule A (Form 990 or 990-EZ) 2019

Page 6 Schedule A (Form 990 or 990-F7) 2019

IRA SOHN CONFERENCE FOUNDATION, INC.

Port V. Type III Non Eurotionally Integrated 500(a)(2) Curporting Organ	oizotion.	•	. ago 🗣
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ  Check here if the organization satisfied the Integral Part Test as a qualifying			in in Dort \/I\ Coc
instructions. All other Type III non-functionally integrated supporting organic			
Section A - Adjusted Net Income	241101101	(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in <b>Part VI</b> ):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionall	y integra	ited Type III supporting	g organization (see
instructions).			• •

Schedule A (Form 990 or 990-EZ) 2019

IRA SOHN CONFERENCE FOUNDATION, INC.

Schedule A (Form 990 or 990-EZ) 2019 Page 7 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Part V Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI). See instructions. 7 Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. Distributable amount for 2019 from Section C, line 6 Line 8 amount divided by line 9 amount 10 (ii) (iii) Underdistributions Distributable Section E - Distribution Allocations (see instructions) **Excess Distributions** Pre-2019 Amount for 2019 Distributable amount for 2019 from Section C, line 6 Underdistributions, if any, for years prior to 2019 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2019 From 2014 From 2015 From 2018 f Total of lines 3a through e Applied to underdistributions of prior years Applied to 2019 distributable amount Carryover from 2014 not applied (see instructions) i Remainder. Subtract lines 3g, 3h, and 3i from 3f. Distributions for 2019 from Section D, line 7: Applied to underdistributions of prior years Applied to 2019 distributable amount Remainder, Subtract lines 4a and 4b from 4. Remaining underdistributions for years prior to 2019, if 5 any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2020. Add lines 3j and 4c. 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

IRA SOHN CONFERENCE FOUNDATION, INC.

Schedule A (Form 990 or 990-EZ) 2019 Page 8

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

SCHEDULE A, PART II -	OTHER INCOME	1			ATTACHMENT 1	
SCHEDULE A, PARI II -	OTHER INCOME	ı				
DESCRIPTION	2015	2016	2017	2018	2019	TOTAL
OTHER INCOME	65.	100,009.	12.	5.	1,462.	101,553.
TOTALS	65.	100,009.	12.	5.	1,462.	101,553.

Schedule A (Form 990 or 990-EZ) 2019

20-4694054

#### Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

Department of the Treasury ▶ Go to www.irs.gov/Form990 for the latest information. Internal Revenue Service **Employer identification number** Name of the organization IRA SOHN CONFERENCE FOUNDATION, INC. 20-4694054 Organization type (check one): Filers of: Section: X Form 990 or 990-EZ 501(c)(3 ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** [X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

990-EZ. or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

JSA

9F1251 1 000

Page 2

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization IRA SOHN CONFERENCE FOUNDATION, INC. Employer identification number 20-4694054

Part I	Contributors (see instructions). Use duplicate copie	s of Part I if additional space is ne	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ 375,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$ 100,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ 100,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6_		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Page 2

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization IRA SOHN CONFERENCE FOUNDATION, INC. Employer identification number 20-4694054

Part I	Contributors (see instructions). Use duplicate copie	s of Part I if additional space is ne	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11		\$ 100,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

_	2
Page	_

Schedule B (Form 990, 990-EZ, or 990-PF) (2019) IRA SOHN CONFERENCE FOUNDATION, Name of organization Employer identification number 20-4694054 Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 13 Χ Person **Payroll** 100,005. Χ Noncash (Complete Part II for noncash contributions.) (d) (a) (b) (c) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (d) (a) (b) (c) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** 

Noncash (Complete Part II for noncash contributions.)

\$

Page 3

Name of organization IRA SOHN CONFERENCE FOUNDATION, INC.

Employer identification number

20-4694054

Part II	<b>Noncash Property</b> (see instructions). Use duplicate copies of Part II if additional space is needed.	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
13	4,424 SHARES - REDFIN		
			04/09/2019
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
		   \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		   \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	

Doa	_	1
raa	e	4

ganization TRA SOHN CONFERENCE FO	UNDATION, INC.		20-4694054
(10) that total more than \$1,000 for the following line entry. For organization contributions of \$1,000 or less for the	the year from any ons completing Par e year. (Enter this in	one contributor. Co t III, enter the total of formation once. See	omplete columns (a) through (e) and f exclusively religious, charitable, etc.
(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
Transferee's name, address, ar			ship of transferor to transferee
(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
	(e) Transf	er of gift	
Transferee's name, address, ar	nd ZIP + 4	Relations	ship of transferor to transferee
(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
	(e) Transf	er of gift	
Transferee's name, address, ar	nd ZIP + 4	Relations	ship of transferor to transferee
(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
Transferee's name, address, ar	nd ZIP + 4	Relations	ship of transferor to transferee
	Exclusively religious, charitable, etc. (10) that total more than \$1,000 for the following line entry. For organizati contributions of \$1,000 or less for the Use duplicate copies of Part III if addit  (b) Purpose of gift  (b) Purpose of gift	Exclusively religious, charitable, etc., contributions to o (10) that total more than \$1,000 for the year from any the following line entry. For organizations completing Par contributions of \$1,000 or less for the year. (Enter this in Use duplicate copies of Part III if additional space is needed (b) Purpose of gift (c) Use  (c) Transf  Transferee's name, address, and ZIP + 4  (b) Purpose of gift (c) Use  (c) Transf  Transferee's name, address, and ZIP + 4  (d) Transf  Transferee's name, address, and ZIP + 4  (e) Transf  (f) Use	Exclusively religious, charitable, etc., contributions to organizations descrit (10) that total more than \$1,000 for the year from any one contributor. Cothe following line entry. For organizations completing Part III, enter the total or contributions of \$1,000 or less for the year. (Enter this information once. Set Use duplicate copies of Part III if additional space is needed.  (b) Purpose of gift  (c) Use of gift  (e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relations  (b) Purpose of gift  (c) Use of gift  (c) Use of gift  (d) Transfer of gift  Transferee's name, address, and ZIP + 4  Relations  (e) Transfer of gift  (e) Transfer of gift  (f) Use of gift  (g) Transfer of gift  (h) Purpose of gift

# **SCHEDULE D** (Form 990)

# Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Employer identification number Name of the organization

IRA	SOHN CONFERENCE FOUNDATION, INC.		20-4694054
Pai		unds or Other Similar Funds or	Accounts.
	Complete if the organization answered "Yes"		
	1 3	(a) Donor advised funds	(b) Funds and 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		
<del>-</del> 5	Did the organization inform all donors and donor advisor	ure in writing that the assets held	in donor advised
3	funds are the organization's property, subject to the organ	_	
6	Did the organization inform all grantees, donors, and dor	<del>-</del>	
U	only for charitable purposes and not for the benefit of the	5 5	
	conferring impermissible private benefit?		
Pai	t II Conservation Easements.		
ı a	Complete if the organization answered "Yes"	on Form 990. Part IV. line 7.	
1	Purpose(s) of conservation easements held by the organi		
	Preservation of land for public use (for example, recreati		of a historically important land area
	Protection of natural habitat		of a certified historic structure
	Preservation of open space	recorvation	or a common motorio chactare
2	Complete lines 2a through 2d if the organization held a qu	ualified conservation contribution in	the form of a conservation
-	easement on the last day of the tax year.	damied conservation contribution in	Held at the End of the Tax Year
2	Total number of conservation easements		2a
a h			2b
b	Total acreage restricted by conservation easements		2c 2c
۲ C	Number of conservation easements on a certified historic		20
d	Number of conservation easements included in (c) acqu		24
2	historic structure listed in the National Register		instead by the organization during the
3	Number of conservation easements modified, transferre	u, released, extinguished, or term	inated by the organization during the
4	tax year ▶ Number of states where property subject to conservation	parament is located	
4 -			
5	Does the organization have a written policy regarding violations, and enforcement of the conservation easement		-
6	Staff and volunteer hours devoted to monitoring, inspecting,		
U	Stair and volunteer nours devoted to monitoring, inspecting,	manding of violations, and emorcing	conservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, ha	ndling of violations, and enforcing c	onservation easements during the year
•	►\$	riaming of violations, and officially o	oneon valient casements a arming the year
8	Does each conservation easement reported on line 2(d) ab	ove satisfy the requirements of secti	ion 170(h)(4)(B)(i)
	and acation 470/h)/4)/D)/ii)2		V     N.
9	In Part XIII, describe how the organization reports conser		
-	balance sheet, and include, if applicable, the text of the fo		
	organization's accounting for conservation easements.	Ğ	
Pa	t III Organizations Maintaining Collections of Art		r Similar Assets.
	Complete if the organization answered "Yes"	on Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB AS	C 958, not to report in its revenu	e statement and balance sheet works
	of art, historical treasures, or other similar assets held	for public exhibition, education,	or research in furtherance of public
L	service, provide in Part XIII the text of the footnote to its fi		
b	If the organization elected, as permitted under FASB AS art, historical treasures, or other similar assets held for provide the following amounts relating to these items:	public exhibition, education, or res	earch in furtherance of public service,
	(i) Revenue included on Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works of art, histo	orical treasures, or other similar	assets for financial gain, provide the
	following amounts required to be reported under FASB AS		<del>-</del> .
а	Revenue included on Form 990, Part VIII, line 1.		<b>&gt;</b> \$
b	Assets included in Form 990, Part X		<b> ▶</b> \$

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

Schedule D (Form 990) 2019

Page 2 Schedule D (Form 990) 2019

IRA SOHN CONFERENCE FOUNDATION, INC.

Pa	rt III Organizations Maintaini	ing Collections o	f Art, Histo	rical Tre	asures, o	r Other	Similar Assets (	continued)
3	Using the organization's acquisition	on, accession, and	other recor	ds, check	c any of th	e follow	ring that make sig	nificant use of its
	collection items (check all that app	ly):		_				
а	Public exhibition		d	Loan	or exchang			
b	Scholarly research		e	Other				
С	Preservation for future gene	rations						
4	Provide a description of the organ	nization's collectior	ns and expla	ain how t	hey furthe	r the or	ganization's exemp	t purpose in Part
	XIII.							
5	During the year, did the organization						-	
	assets to be sold to raise funds rath		tained as pa	irt of the o	organizatio	n's collec	ction?	Yes No
Pa	rt IV Escrow and Custodial A Complete if the organiza 990, Part X, line 21.	•	es" on For	m 990, F	Part IV, line	e 9, or r	eported an amou	nt on Form
1a	Is the organization an agent, truste	ee, custodian or oth	ner intermed	liary for c	ontribution	s or othe	r assets not	
	included on Form 990, Part X?						[	Yes No
b	If "Yes," explain the arrangement i	n Part XIII and com	plete the fol	llowing tab	ole:			
							Amount	<u>t</u>
С	Beginning balance					;		
d	Additions during the year					I		
е	Distributions during the year					!		
f	Ending balance							
	Did the organization include an am							Yes No
$\overline{}$	If "Yes," explain the arrangement i	n Part XIII. Check	nere if the ex	xplanation	has been p	orovided	on Part XIII	
Pa	rt V Endowment Funds. Complete if the organiza	ation answered "V	'es" on For	m 000 E	Part IV/ line	a 10		
	Complete ii the organiza	(a) Current year	(b) Prio		(c) Two ye		(d) Three years back	(e) Four years back
				i yeai	(6) 1110 90	aro buon	(d) Tillee years back	(e) I our years back
1a	Beginning of year balance							
b	Contributions							
С	Net investment earnings, gains,							
	and losses							
d	Grants or scholarships							
е	Other expenditures for facilities							
	and programs							
f	Administrative expenses End of year balance							
g 2	Provide the estimated percentage		and halance	e (line 1a	column (a)	) hald as	•	
a	Board designated or quasi-endown			c (iii c 1g,	column (a)	) ficia as	•	
b	Permanent endowment	%	_					
С	Term endowment ▶	%						
	The percentages on lines 2a, 2b, a	and 2c should equal	100%.					
3a	Are there endowment funds not in	the possession of	the organiza	ation that	are held a	nd admir	nistered for the	
	organization by:							Yes No
	(i) Unrelated organizations							3a(i)
	(ii) Related organizations							3a(ii)
b	If "Yes" on line 3a(ii), are the relate	•	•					3b
4	Describe in Part XIII the intended u		ation's endo	wment fur	nds.			
Pa	rt VI Land, Buildings, and Equ Complete if the organize	ation answered "`	es" on For	rm 990, l	Part IV, Iin	e 11a. S	See Form 990, Pa	art X, line 10.
	Description of property	(a) Cost	or other basis	(b) Cost	or other basis	(c) Acc	cumulated (c	d) Book value
10	Land	,	estment)	(0	ther)	depr	eciation	
та b	Buildings							
C	Leasehold improvements							
d	Equipment.					1		
	Other							
	I Add lines 1a through 1e (Column		rm 000 Part	Y colum	n (R) line 1	Oc )	<b>•</b>	

Schedule D (Form 990) 2019

Schedule D (Form 990) 2019 Page 3

IRA SOHN CONFERENCE FOUNDATION, INC.

Part VII	Investments - Other Securities. Complete if the organization answered	I "Yes" on Form 99	0, Part IV, line 11b. See Form 990, Part X, line 12.	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	
(1) Financia	al derivatives			
(2) Closely	held equity interests			
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	n (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments - Program Related.  Complete if the organization answered	Yes" on Form 99	0, 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)				
	n (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.  Complete if the organization answered	I "Yes" on Form 99	0, Part IV, line 11d. See Form 990, Part X, line 15.	
	(a) De	scription	(b) Book value	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	umn (b) must equal Form 990, Part X, col. (B) I	ine 15.)		
Part X	Other Liabilities.  Complete if the organization answered line 25.	I "Yes" on Form 99	0, Part IV, line 11e or 11f. See Form 990, Part X,	
1.	(a) Descrip	tion of liability	(b) Book value	
(1) Feder	al income taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colum	nn (b) must equal Form 990, Part X, col. (B) line 25.)		Aborana instanta financia de la compania del compania del compania de la compania del compania del compania de la compania de la compania del compan	

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

Χ

PAGE 30

IRA SOHN CONFERENCE FOUNDATION, INC.

Schedule D (Form 990) 2019 Page 4 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 3,738,010. 1 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: 14,906 2b 2c c Recoveries of prior year grants..... 1,055,000. Other (Describe in Part XIII.) 1,069,906. 2e 2,668,104. 3 3 Amounts included on Form 990. Part VIII. line 12. but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b . . . . . . . 4b **b** Other (Describe in Part XIII.) 4c 2,668,104. Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 3,535,720. 1 2 Amounts included on line 1 but not on Form 990. Part IX. line 25: 2a 2b 2c c Other losses...... 1,055,000. Other (Describe in Part XIII.) 1,055,000. 2e 2,480,720. 3 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: 4a a Investment expenses not included on Form 990, Part VIII, line 7b . . . . . . . **b** Other (Describe in Part XIII.) 2,480,720. Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.). . . . Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. SEE PAGE 5

Schedule D (Form 990) 2019

20-4694054

Page 5

IRA SOHN CONFERENCE FOUNDATION, INC.

# Part XIII Supplemental Information (continued)

SCHEDULE D, PART XIII

THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. ACCORDINGLY, THE FINANCIAL STATEMENTS DO NOT REFLECT A PROVISION FOR FEDERAL INCOME TAXES. THERE WERE NO UNCERTAIN TAX POSITIONS AT DECEMBER 31,2019 AND 2018. THERE ARE NO TAX RELATED PENALTIES AND INTEREST RECORDED FOR THE YEARS ENDED DECEMBER 31,2019 AND 2018.

SCHEDULE D, PARTS XI AND XII, LINE 2D FUNDRAISING EXPENSES OF \$1,055,000

Schedule D (Form 990) 2019

# **SCHEDULE F** (Form 990)

# Statement of Activities Outside the United States

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990.

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

OMB No. 1545-0047 **Open to Public** Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Part I

20-4694054 IRA SOHN CONFERENCE FOUNDATION, INC. General Information on Activities Outside the United States. Complete if the organization answered "Yes" on

	Form 990, Part IV, line 14th	э.		·	, and the second	
1	For grantmakers. Does the org	ganization mai	ntain records	to substantiate the amou	int of its grants and	
	other assistance, the grantees'					
	award the grants or assistance?					X Yes No
2	For grantmakers. Describe in I outside the United States.	Part V the org	anization's pro	cedures for monitoring t	he use of its grants ar	d other assistance
3	Activities per Region. (The follow	ving Part I, line	3 table can be	duplicated if additional sp	ace is needed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1)	EUROPE	0.	0.	GRANTMAKING		57,493.
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
10)						
11)						
12)						
13)						
14)						
15)						
16)						
17)						
3a b						57,493.
c	sheets to Part I  Totals (add lines 3a and 3b)					57.493.

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

Schedule F (Form 990) 2019

IRA SOHN CONFERENCE FOUNDATION, INC.

20-4694054

Schedule F (Form 990) 2019

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, othe
				RESEARCH					
(1)			EUROPE/ICELAND/GREENLAND	SUPPORT	46,993.	WIRE			
				GENERAL					
(2)			EUROPE/ICELAND/GREENLAND	OPERATIONS	10,500.	WIRE			
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
10)									
11)									
12)									
13)									
14)									
15)									
16)									
	er total number of recipien	nt organizations listed abo	ove that are recognized as o	charities by the f	foreign country, re	cognized as tax	-exempt		
	the IRS, or for which the gr								2.

Schedule F (Form 990) 2019

IRA SOHN CONFERENCE FOUNDATION, INC. 20-4694054

Schedule F (Form 990) 2019

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
0)							
11)							
12)							
3)							
4)							
5)							
6)							
7)							
18)							

Schedule F (Form 990) 2019

Page 4 Schedule F (Form 990) 2019

IRA SOHN CONFERENCE FOUNDATION, INC.

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

Schedule F (Form 990) 2019

JSA

IRA SOHN CONFERENCE FOUNDATION, INC.

Schedule F (Form 990) 2019 Page 5

Part V **Supplemental Information** 

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

FORM 990, PART I, QUESTION 1

THE ORGANIZATION MAINTAINS RECORDS TO SUBSTANTIATE THE AMOOUNT OF GRANTS,

THE GRANTEE'S ELIGIBILITY, AND THE SELECTION CRITERIA USED TO AWARD THE

GRANTS.

Schedule F (Form 990) 2019

20-4694054

#### **SCHEDULE G** (Form 990 or 990-EZ)

## **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

Department of the Treasury ► Go to www.irs.gov/Form990 for instructions and the latest information. OMB No. 1545-0047 Open to Public

Inspection Internal Revenue Service Name of the organization Employer identification number 20-4694054 IRA SOHN CONFERENCE FOUNDATION, INC. Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. 1 Mail solicitations Solicitation of non-government grants а Internet and email solicitations f Solicitation of government grants Phone solicitations Special fundraising events C g In-person solicitations d Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (iii) Did fundraiser have (vi) Amount paid to (i) Name and address of individual (iv) Gross receipts (or retained by) custody or control of (or retained by) (ii) Activity or entity (fundraiser) from activity fundraiser listed in contributions? organization col. (i) Yes No 1 2 3 6 8 9 10 Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

Schedule G (Form 990 or 990-EZ) 2019

Page 2 Schedule G (Form 990 or 990-EZ) 2019

IRA SOHN CONFERENCE FOUNDATION, INC.

Pa	rt I	Fundraising Events. Completed more than \$15,000 of fundrated events with gross receipts greaters.	aising event contributi			
			(a) Event #1 SOHN CONFERENCE	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
(I)			(event type)	(event type)	(total number)	COI. (C))
Revenue	1	Gross receipts	3,244,196.		0.	3,244,196
ď		Less: Contributions	2,189,196.		0.	2,189,196
	3	Gross income (line 1 minus line 2)	1,055,000.		0.	1,055,000
	4	Cash prizes			0.	
	5	Noncash prizes			0.	
sesue	6	Rent/facility costs			0.	
Direct Expenses	7	Food and beverages			0.	
Direc	8	Entertainment			0.	
	9	Other direct expenses	1,055,000.		0.	1,055,000
	11	Direct expense summary. Add lin Net income summary. Subtract li	ne 10 from line 3, colu	ımn (d)	<b>&gt;</b>	1,055,000
Pa	rt	<b>Gaming.</b> Complete if the org \$15,000 on Form 990-EZ, lin	anization answered "` le 6a.	Yes" on Form 990,	Part IV, line 19, or	reported more than
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
<u>~</u>	1	Gross revenue				
ses	2	Cash prizes				
Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
_	5	Other direct expenses	Yes%	Yes%	Yes%	
	6	Volunteer labor	No No	No No	No No	
	7	Direct expense summary. Add lin	es 2 through 5 in colu	mn (d)	▶	
	8	Net gaming income summary. Su	ubtract line 7 from line	1, column (d)	<u></u> ▶	
9 a k	1	Enter the state(s) in which the org Is the organization licensed to con If "No," explain:	duct gaming activities	in each of these stat	es?	Yes No
10 a	1	Were any of the organization's gaming If "Yes," explain:	g licenses revoked, susp	pended, or terminated d	uring the tax year?	Yes No

IRA SOHN CONFERENCE FOUNDATION, INC

20-4694054

Sched	ule G (Form 990 or 990-EZ) 2019
11	Does the organization conduct gaming activities with nonmembers?
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
-	formed to administer charitable gaming?
13	Indicate the percentage of gaming activity conducted in:
а	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and
14	records:
	Name ▶
	Address ►
15 a	Does the organization have a contract with a third party from whom the organization receives gaming
	revenue?
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the
	amount of gaming revenue retained by the third party ▶ \$
С	If "Yes," enter name and address of the third party:
	Name ▶
	Address ►
16	Gaming manager information:
	Name ▶
	Gaming manager compensation ▶\$
	Description of services provided ▶
	Director/officer
17	Mandatory distributions:
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license? Yes No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations
	or spent in the organization's own exempt activities during the tax year ▶ \$
Par	

Schedule G (Form 990 or 990-EZ) 2019

# SCHEDULE I (Form 990)

Department of the Treasury

Internal Revenue Service

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

on Form 990, Part IV, line 21 or 22.

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.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization	·					Employer identificat	ion number
IRA SOHN CONFERENCE FOUNDATION, I	INC.					20-469405	54
Part I General Information on Grants a	nd Assistanc	е				•	
<ol> <li>Does the organization maintain records to the selection criteria used to award the grain to the selection part IV the organization's process.</li> </ol>	nts or assistand	e?					X Yes No
Part II Grants and Other Assistance to Part IV, line 21, for any recipient		_			additional space is n		es" on Form 990,
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(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
(1) DAMON RUNYON CANCER RESEARCH FOUNDATION							
55 BROADWAY, STE 302 NEW YORK, NY 10006	13-1933825	501(C)(3)	576,000.				FELLOWSHIP AWARDS
(2) THE ROCKEFELLER UNIVERSITY							
1230 YORK AVENUE NEW YORK, NY 10065	13-1624158	501(C)(3)	350,000.				RESEARCH SUPPORT
(3) COLUMBIA UNIVERSITY MEDICAL CENTER							
630 W 168TH STREET NEW YORK, NY 10032	13-6162924	501(C)(3)	286,690.				RESEARCH SUPPORT
(4) MEMORIAL SLOAN KETTERING CANCER CENTER							
633 THIRD AVE., 28TH FLOOR	13-1624182	501(C)(3)	650,000.				RESEARCH SUPPORT
(5) WEILL CORNELL MEDICAL COLLEGE							
575 LEXINGTON AVE NEW YORK, NY 10022	13-6094042	501(C)(3)	10,000.				RESEARCH SUPPORT
(6) HACKENSACK UNIVERSITY MEDICAL CENTER							
30 PROSPECT AVE HACKENSACK, NJ 07601	22-1487576	501(C)(3)	156,666.				RESEARCH SUPPORT
(7) CAMP SIMCHA (CHAI LIFELINE)							
151 WEST 30TH STREET NEW YORK, NY 10001	11-2940331	501(C)(3)	10,000.				GENERAL OPERATIONS
_(8)							
(9)							
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)(3) and	•	•					7.
3 Enter total number of other organizations li							nedule I (Form 990) (2019)

JSA

9E1288 1.000

Schedule I (Form 990) (2019)

	, , ,						
Part III				e organization	answered "Yes" on F	Form 990, Part IV, line 22.	
_	Part III can be duplicated if additional spa	ce is needed.	ı.				

(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 non-cash assistance
_1					
2					
_3					
_4					
5					
_ 6					
7					

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

SCHEDULE I, PART IV

THE ORGANIZATION REQUIRES THE GRANTEES TO SUBMIT WRITTEN REPORTS

DETAILING ACHIEVEMENTS AND FINANCIAL UPDATES. ALL GRANTEES SIGN A

CONTRACT WHICH OUTLINES ALL REQUIREMENTS BEFORE THEIR GRANT CHECK IS

DELIVERED.

Schedule I (Form 990) (2019)

## **SCHEDULE M** (Form 990)

# **Noncash Contributions**

**Open to Public** 

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

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

Employer identification number

IRA SOHN CONFERENCE FOUNDATION, INC.

20-4694054

Par	Types of Property	·						
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method o			
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household							
^	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property		2.	105,916.				
9	Securities - Publicly traded Securities - Closely held stock		2.	100/5101				
10 11	Securities - Closely field stock  Securities - Partnership, LLC,							
''	or trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation							
	contribution - Historic							
	structures							
14	Qualified conservation							
	contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ►()							
26	Other ►()							
27	Other ►()							
28	Other ►( )	h 4h.a. a.u.u.						
29	Number of Forms 8283 received which the organization completed F	, ,	,		29			
	which the organization completed is	-01111 8283,	Part IV, Donee Acknowledg	jement	23		Yes	No
30a	During the year, did the organizat	ion receive	hy contribution any prope	rty reported in Part I line	s 1 through		100	110
Jua	28, that it must hold for at least the				_			
	to be used for exempt purposes for	•			•	30a		Х
b	If "Yes," describe the arrangement i		ording portod					
31	Does the organization have a		ance policy that require	es the review of any i	nonstandard			
٠.	contributions?	•		•		31		Х
32a	Does the organization hire or use							
	contributions?	-	_			32a		Х
b	If "Yes," describe in Part II.							
	If the organization didn't report an	amount in c	olumn (c) for a type of pro	perty for which column (a)	is checked.			
	describe in Part II.							

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

Schedule M (Form 990) 2019

IRA SOHN CONFERENCE FOUNDATION, INC.

Schedule M (Form 990) (2019) Page 2

Part II

**Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Schedule M (Form 990) (2019)

20-4694054

JSA

# **SCHEDULE 0** (Form 990 or 990-EZ)

#### Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization

IRA SOHN CONFERENCE FOUNDATION, INC.

20-4694054

Employer identification number

FORM 990, PART VI, SECTION B, LINE 11B A COPY OF FORM 990 WAS PROVIDED TO THE ORGANIZATION'S BOARD FOR REVIEW PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C THE ORGANIZATION REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES ANY CONFLICTS OF INTEREST.

FORM 990, PART VI, SECTION B, LINES 15A AND 15B THE BOARD REVIEWS COMPARABLE ORGANIZATIONS ON GUIDESTAR TO DETERMINE APPROPRIATE AND REASONABLE COMPENSATION FOR THE ORGANIZATIONS OFFICERS.

FORM 990, PART VI, SECTION C, LINE 19 THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

ATTACHMENT FORM 990, PART VI, LINE 17 - STATES

AL, AR, CA, CO, CT,

DC, FL, GA, HI, IL, ME, MD, MA, MI,

MN, MO, NH, NJ, NY, NC, OH, OK, PA,

RI, SC, TN, UT, VA, WA, WV, WI,

ATTACHMENT 2

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS

COMPENSATION

DESCRIPTION OF SERVICES

Schedule O (Form 990 or 990-EZ) 2019 Page 2 Name of the organization Employer identification number 20-4694054 IRA SOHN CONFERENCE FOUNDATION, INC. ATTACHMENT 2 (CONT'D) 990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS NAME AND ADDRESS DESCRIPTION OF SERVICES COMPENSATION COMPASS GROUP - RESTAURANT ASSOCIATES FOOD SERVICES/LABOR 242,740. 130 W 56TH ST NEW YORK, NY 10019 GARWOOD EVENTS LLC EVENT MANAGEMENT 116,392. 207 GIBBON STREET ALEXANDRIA, VA 22314 MARINE LANE LLC WEB MANAGEMENT 116,242. 320 5TH AVENUE, SUITE 509 NEW YORK, NY 10001 ATTACHMENT 3 FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGES BEGINNING ENDING DESCRIPTION BOOK VALUE BOOK VALUE PREPAID EXPENSES 216,562. 49,618. 216,562. 49,618. TOTALS ATTACHMENT 4 FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES BEGINNING ENDING COST DESCRIPTION BOOK VALUE BOOK VALUE OR FMV MUTUAL FUNDS 2,075,406. 2,147,956. FMV 2,075,406. 2,147,956. TOTALS ATTACHMENT 5

Schedule O (Form 990 or 990-EZ) 2019

Schedule O (Form 990 or 990-EZ) 2019 Page 2

Employer identification number Name of the organization

IRA SOHN CONFERENCE FOUNDATION, INC. 20-4694054 ATTACHMENT 5 (CONT'D)

FORM 990, PART X - DEFERRED REVENUE

BEGINNING

DESCRIPTION BOOK VALUE

DEFERRED REVENUE 57,500.

> 57,500. TOTALS