Department of the Treasury Internal Revenue Service

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

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundation: Do not enter social security numbers on this form as it may be made public.

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

			endar year, or tax year beginning  C Name of organization		U20	D Employ	er identi	fication number
Acheck if applicable: Address change Name change Initial return Final return/terminated Amended return Application pending		hange	HOLLYWOOD FOREIGN PRESS ASSOC	IATION			91816	
		-	Doing business as					
			N 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	· · · · · · · · · · · · · · · · · · ·		E Telepho	ne number	•
Amended return			Number and street (or P.O. box if ma 646 NORTH ROBERTSON BOULEVARD	ail is not delivered to street address) Room/	suite	(310)	657-173	31
			City or town, state or province, count WEST HOLLYWOOD, CA 90069	try, and ZIP or foreign postal code				
			F Name and address of principal	al officer:	H(a)	Is this a group r	eceipts \$ 31	
			ALI SAR	ur officer.		subordinates?		Yes V No
			646 N ROBERTSON BLVD WEST HOLLYWOOD,CA 9006	69	H(b)	Are all subordin included?	ates	☐Yes ☐ No
Та	x-exemp	pt status:	501(c)(3) 501(c)(6) (ir	nsert no.) 4947(a)(1) or 527		If "No," attach a		-
W	ebsite:	:► N/A	1		11(0)	Group exemption	n numbei	r
<b>(</b> For	n of orga	ganization:	Corporation Trust Association	on Other •	<b>L</b> Year o	of formation: 1982	<b>M</b> State	of legal domicile: CA
D,	art I	Sum	mary					
1 6			scribe the organization's mission	or most significant activities:				
nce	RE CC AS	ECORDI OVERIN SSOCIA ND VISU	NG ART FORMS. THE ASSOCIA G THE ENTERTAINMENT INDU TION HELP STIMULATE AND F JAL RECORDING ART INDUSTI	TELEVISION, DRAMATIC, MUSICA ATION IS A BUSINESS LEAGUE O ISTRY FOR FOREIGN PUBLICATIO PROMOTE INTEREST IN THE MOT RIES IN THE UNITED STATES AN	F JOURN NS. THE ION PICT D ABROA	ALISTS AND PH PRESS CONFER URE, TELEVISI D. THE ASSOCI	HOTOGR RENCES ION, THI IATION	APHERS HOSTED BY THE EATRICAL ARTS ANNUALLY
8	PΙ	ICTURES	S, THEATER, TELEVISION, AND	DS WHICH RECOGNIZE OUTSTAND THE VISUAL AND RECORDING A	ARTS. TH	E PUBLICITY G		
a o o	IN	NTERNA	TIONALLY RECOGNIZED AWAF	RDS PROGRAM PROMOTES SUCH	FIELDS (	OF ENDEAVOR.		
8	_							
Activities & Governance	<b>2</b> C	Check th	is box ▶ if the organization di	iscontinued its operations or dispose	d of more	than 25% of its	net asse	ets.
CIL	_		of voting members of the governi				3	9
Ť				of the governing body (Part VI, line 1b	•		4	0
			• •	calendar year 2019 (Part V, line 2a)			5	9 3
			nber of volunteers (estimate if no	ecessary)			6 7a	500,050
		i otai uiii	elated busilless reveiled from ra	art viii, colulliii (C), lille 12			/a	
	<b>b</b> N	Net unre	lated business taxable income fr	om Form 990-T, line 39			7b	•
	<b>b</b> N	Net unre	lated business taxable income fr	om Form 990-T, line 39	<u></u>	 Prior Year	7b	•
9	<b>8</b> C	Contribut	ions and grants (Part VIII, line 1	h)			<b>7b</b>	413,411
enne/	<b>8</b> C <b>9</b> P	Contribut Program	cions and grants (Part VIII, line 1h service revenue (Part VIII, line 2	h)			248	413,411 Current Year
Revenue	<b>8</b> C <b>9</b> P <b>10</b> Ir	Contribut Program Investme	cions and grants (Part VIII, line 1 service revenue (Part VIII, line 2 ent income (Part VIII, column (A),	h)		1,2 31,154,2 987,2	248 112 232	413,411 Current Year 1,254 30,895,558 506,048
Revenue	8 C 9 P 10 Ir 11 O	Contribut Program Investme Other rev	cions and grants (Part VIII, line 1h service revenue (Part VIII, line 2q ent income (Part VIII, column (A), venue (Part VIII, column (A), lines	h)		1,2 31,154,3 987,2 13,3	248 112 232 176	413,411 Current Year 1,254 30,895,558 506,048 13,715
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Revenue	8 C 9 P 10 Ir 11 O 12 T 13 G	Contribut Program Investme Other rev Fotal rev Grants an	cions and grants (Part VIII, line 1h service revenue (Part VIII, line 2g ent income (Part VIII, column (A), venue (Part VIII, column (A), line enue—add lines 8 through 11 (m nd similar amounts paid (Part IX,	h)		1,2 31,154,3 987,2 13,3	248 112 232 176 768 320	413,411  Current Year  1,254  30,895,558  506,048  13,715  31,416,575  4,630,891
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Net Assers of Expenses	8 C 9 P 10 Ir 11 O 12 T 13 G 14 B 15 S 16a P b T 17 O 18 T 19 R 20 T 21 T 22 N	Contribut Program Investme Other rev Fotal rev Grants al Benefits   Salaries, Professio Fotal fundr Other ex Fotal exp Revenue Fotal liab Net assel	cions and grants (Part VIII, line 1h service revenue (Part VIII, line 2gent income (Part VIII, column (A), venue (Part VIII, column (A), lines enue—add lines 8 through 11 (m and similar amounts paid (Part IX, paid to or for members (Part IX, cother compensation, employee to all fundraising fees (Part IX, colaising expenses (Part IX, column (A), lines penses (Part IX, column (A), lines penses. Add lines 13–17 (must expenses. Subtract line 18 lets (Part X, line 16)	h)	12)	1,2 31,154, 987,2 13,3 32,155,3 5,891,3 3,436,3 7,190,3 16,517,6 15,637,8 eginning of Currer Year 62,716,3	248 112 232 176 768 320 0 322 0 260 902 866 nt	413,411  Current Year  1,254 30,895,558 506,048 13,715 31,416,575 4,630,891 0 4,316,172 0 6,176,588 15,123,651 16,292,924 End of Year  79,009,519
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Net Assets of Expenses and Balances Expenses	8 C 9 P 10 Ir 11 O 12 T 13 G 14 B 15 S 16a P b T 17 O 18 T 19 R 20 T 21 T 22 N TIII T penal nowledgrer has	Contribut Program Investme Other rev Grants an Benefits   Salaries, Professio Total fundr Other ex Total exp Revenue  Total liab Net asset  Sign Ities of p Ities of p Ities any kn	cions and grants (Part VIII, line 1h service revenue (Part VIII, line 2gent income (Part VIII, column (A), lines enue—add lines 8 through 11 (mond similar amounts paid (Part IX, paid to or for members (Part IX, column fundraising fees (Part IX, column fundraising fees), column fundraising fees (Part IX, column fundraising fees), fund fundraising fees fundfundraising fees fundfundraising fees fundfundraising fees fundfundraising fees fundraising fees fees fees fundraising fees fees fees fundraising fees fees fees fees fees fees fees fundraising fees fees fees fees fees fees fees fee	h)	12) 10)  Beauting scl	1,3 31,154, 987,3 13, 32,155, 5,891, 3,436,3 7,190,3 16,517,9 15,637,8 eginning of Curren Year 62,716,8 hedules and state er) is based on a	248 112 232 176 768 320 0 322 0 260 902 866 nt 595 0	413,411  Current Year  1,254 30,895,558 506,048 13,715 31,416,575 4,630,891 0 4,316,172 0 6,176,588 15,123,651 16,292,924 End of Year  79,009,519 and to the best of
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Inde Salances Fund Balances From Section 1	8 C 9 P 10 Ir 11 O 12 T 13 G 14 B 15 S 16a P b T 17 O 18 T 19 R 20 T 21 T 22 N rt II r penal nowledgrer has	Contribut Program Investme Other rev Grants an Benefits   Galaries, Professio Fotal fundr Other ex Fotal exp Revenue  Fotal ass Fotal liab Net assel  Sign Ities of p dge and t is any kn  ALI SAF Type o	cions and grants (Part VIII, line 1h service revenue (Part VIII, line 2gent income (Part VIII, column (A), venue (Part VIII, column (A), linesenue—add lines 8 through 11 (mond similar amounts paid (Part IX, paid to or for members (Part IX, column (B), linesenue—add li	h)	-10) -anying scithan office	1,3 31,154, 987,3 13, 32,155,3 5,891,3 3,436,3 7,190,3 16,517,9 15,637,8 eginning of Curren Year 62,716,4 hedules and state er) is based on a	248 112 232 176 768 320 0 322 0 260 902 866 nt 595 0 595	413,411  Current Year  1,254 30,895,558 506,048 13,715 31,416,575 4,630,891 0 4,316,172 0 6,176,588 15,123,651 16,292,924 End of Year  79,009,519 and to the best of
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Paic Paices Fxpenses Paices Pa	8 C 9 P 10 Ir 11 O 12 T 13 G 14 B 15 S 16a P b T 17 O 18 T 19 R 20 T 21 T 22 N rt II r penal nowledgarer has	Contribut Program Investme Other rev Grants an Benefits   Salaries, Professio Total fundr Other ex Total exp Revenue  Total liab Net asset Sign Ities of p dge and t s any kn ALI SAF Type o	cions and grants (Part VIII, line 1h service revenue (Part VIII, line 2gent income (Part VIII, column (A), venue (Part VIII, column (A), linesenue—add lines 8 through 11 (mod similar amounts paid (Part IX, paid to or for members (Part IX, column (B), linesenue—service (Part IX, column (B), linesenue—service (Part IX, column (B), linesenue (Part IX, column (B), linesenue (Part IX, column (A), linesenue (Part IX, column (A), linesenue (Part IX, column (B), linesenue (Part IX, column (B), linesenue (Part IX, column (B), linesenue (Part IX, line 13–17 (must expense (Part IX, line 16)	h)	anying scithan office	1,3 31,154, 987,3 13, 32,155, 5,891, 3,436,3 7,190, 16,517,9 15,637, eginning of Currer Year 62,716,9 hedules and state er) is based on a 2021-03-10 Date  0 Check if self-employed	248 112 232 176 768 320 0 322 0 260 902 866 nt 595 0 595 ements, all inform	413,4:  Current Year  1,2 30,895,5 506,0. 13,7 31,416,5 4,630,8 4,316,1  6,176,5 15,123,6 16,292,9 End of Year  79,009,5  79,009,5 and to the best of ation of which

ENCINO, CA 91436

May the IRS discuss this return with the preparer shown above? (see instructions)

✓ Yes ☐ No

Form	n 990 (2019)				Page <b>2</b>
P	art III Statement of F	Program Service A	ccomplishments		
	Check if Schedule	O contains a response o	or note to any line in this	s Part III	
1	Briefly describe the organ	ization's mission:			
DIS PIC ACH NON	SEMINATION OF INFORM TURES AND TELEVISION IEVEMENTS BY CONFERR	ATION CONCERNING THROUGH NEWS MED ING ANNUAL AWARD:	THE AMERICAN CULT DIA IN VARIOUS FORE S OF MERIT (GOLDEN	FOREIGN COUNTRIES AND TURE AND TRADITIONS AS INTERES OF THE STATE OF T	DEPICTED IN MOTION GNIZE OUTSTANDING
2	Did the organization unde the prior Form 990 or 99	, -	ogram services during th	e year which were not listed o	on <b>∑Yes √ No</b>
	If "Yes," describe these n	ew services on Schedu	ile O.		
3	Did the organization cease services?	e conducting, or make s	significant changes in ho	w it conducts, any program	☐Yes 🔽 No
	If "Yes," describe these c	hanges on Schedule O.			
4		(3) and 501(c)(4) orga	nizations are required to	f its three largest program se report the amount of grants a l.	
4a	(Code:	) (Expenses \$	including grants	of \$ ) (Reve	nue \$
	RECOGNIZE OUTSTANDING A	CHIEVEMENTS BY CONFERR	ING ANNUAL AWARDS OF MER	IT (GOLDEN GLOBE AWARDS).	
4b	(Code:	) (Expenses \$	including grants	of\$)(Reve	nue \$
40	ESTABLISH FAVORABLE RELA	TIONS AND CULTURAL TIES	5 5	S AND THE USA BY THE DISSEMINAT	TION OF INFORMATION CONCERNING THE
4c	(Code: CONTRIBUTE TO OTHER NON	) (Expenses \$ PROFIT ORGANIZATIONS CO	including grants		nue \$ )
4d	Other program services	(Describe in Schedule	0.)		
-Tu	(Expenses \$	•	g grants of \$	) (Revenue \$	)

Total program service expenses ▶

Form	990 (2019)			Page :
Pa	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Νo
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D,</i> Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Νo
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νo
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly of through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10		Νo
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.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
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		Νo
	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		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	11d		Νo
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	110		
•	The organization report an amount for other naminties in Part X, line 23: 11 Tes, complete Schedule D, Part X	11e		Νo
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that			

addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

any foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . . 📆

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . .

domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

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12a បីធ្វើវិទ្ធាត្ត ទល្បានមន្ត្រាស់ នេះ និងមនុស្ស dependent audited financial statements for the tax year? If "Yes," complete 

**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

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other

Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions) . . . . Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II . . . . . . . . . . . . . . . . .

**b** If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or

assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . . \*\*\*

Did the organization report on Part IX column (A), line 3, more than \$5,000 of grants or other assistance to or for

**b** Was the organization included in consolidated, independent audited financial statements for the tax year?

11f

12a

12b

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14a

14b

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20a

20b

Yes

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Yes

Yes

Nο

Νo

Nο

Νo

Nο

Nο

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No

Yes

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24a

24b

24c

24d

25a

25b

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28a

28b

28c

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35a

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1a

1b

Yes

Yes

Yes

Yes

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n 990 (	(2019)		Page
rt IV	Checklist of Required Schedules (continued)		
		Yes	No

rt IV Checklist of Required Schedules (continued)		
	Yes	No
Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		Νo

t IV C	Checklist of Required Schedules (continued)		
		Yes	No
D: 1 11			

23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's

**b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I . . . . .

**b** Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior

year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If

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

哲道學研究 公公司用包括证例所的的形式的 智利并引力 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,

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," 

c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes,"

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

Hid the Granketation field to the schedule N, Part I

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete

พื่แร้งหลื เชาสูมิศาร์ลเรียกใช้เลี้ยง ใช้เร็กง tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV,

**b** If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🖠 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable

Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V .

or to a 35% controlled entity (including an employee thereof) or family member of any of these persons?

**b** A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV .

**d** Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?

"Yes," complete Schedule L, Part I

If "Yes," completeSchedule L,Part III

conservation contributions?

sections 301.7701-2 and 301.7701-3?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable

**b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .

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Part V

entity or family member of any of these persons?

instructions for applicable filing thresholds, conditions, and exceptions):

current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d

ו טפפ וווונ	(2019)	Pag
Part IV	Checklist of Required Schedules (continued)	

Form **990** (2019)

Pai	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at 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)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial	4a		No
b	BCCOMMIT Denter the name of the foreign country:			
5a	Washibe organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7</b> g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
ь 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	<b>Note.</b> 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 13b			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No
16	Is "thesp'rgsameizastorocationes warmaticines Forstoitមួយដែល នៃសាម្រាល់ leoNthe section 4968 excise tax on net investment income?	16		Νο

n 990 (2019)			Pa
Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI	,		
ection A. Governing Body and Management			
		Yes	ı
1			

	8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedul Check if Schedule O contains a response or note to any line in this Part VI	e 0. S	ee instructions	5. • • •			. 🔽
Se	ction A. Governing Body and Management						
						Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax	1a		9			
	Yeare are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.						
b	Enter the number of voting members included in line 1a, above, who are independent	1b		0			
2	Did any officer, director, trustee, or key employee have a family relationship or a bu other officer, director, trustee, or key employee?		•	,	2	Yes	
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co				3		Νo
4	Did the organization make any significant changes to its governing documents since	e the p	orior Form 990	) was	4		Νo
5	Blackher organization become aware during the year of a significant diversion of the o	organi	zation's asset	s? .	5		Νo
						1	

1a	Enter the number of voting members of the governing body at the end of the tax	1a	9			
	Yeare are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	0			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?		·	2	Yes	
3	Did the organization delegate control over management duties customarily performed supervision of officers, directors or trustees, or key employees to a management con	•		3		Νo
4	Did the organization make any significant changes to its governing documents since	the p	rior Form 990 was	4		Νo
5	bladthe organization become aware during the year of a significant diversion of the o	rgani	zation's assets? .	5		Νo
6	Did the organization have members or stockholders?			6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power more members of the governing body?			7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval or persons other than the governing body?		·	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written action year by the following:	ns ur	dertaken during the			
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, whorganization's mailing address? If "Yes," provide the names and addresses in Schedule			9		No

	other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was	4		Νo
5	600 he organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo
6	Did the organization have members or stockholders?	6	Yes	
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	Yes	
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	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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 in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ıe Cod	e.)
			Yes	No
<b>10</b> a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
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? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			

4	Did the organization make any significant changes to its governing documents since the prior Form 990 was	4		IN O
5	$^{ m fil}$ d $^{ m c}$ organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
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	Yes	
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	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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 in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ue Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
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? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			

	more members of the governing body?	7a	Yes	
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	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	_
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 in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal R	even	ie Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
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? If "No," go to line 13	12a	Yes	_
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
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	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
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		
	ction C. Disclosure			

-	the governing body.		1 0 3						
b	Each committee with authority to act on behalf of the governing body?	8b	Yes						
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 in Schedule O	9		Νο					
Se	<b>Section B. Policies</b> (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		Νo					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Νo					
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? If "No," go to line 13	12a	Yes						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes						
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	Yes						
13	Did the organization have a written whistleblower policy?	13	Yes						
14	Did the organization have a written document retention and destruction policy?	14	Yes						
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official	15a	Yes						
b	Other officers or key employees of the organization	15b	Yes						
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νo					
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							
Se	ction C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed C A								

D	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 filing the form?	11a		Νo
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? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
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	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
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		
Se	ection C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed C A			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T			

Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website Vpon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of 19 interest policy, and financial statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records: ► HOLLYWOOD FOREIGN PRESS ASSOCIATION 646 N ROBERTSON BLVD WEST HOLLYWOOD, CA 90069 (310) 657-1731 Form **990** (2019) Part VII

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

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

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

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

See instructions for the order in which to list the persons above. Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.										
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	more pers	person is both an officer and a director/trustee)			ess er !)	(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	
(1) MEHER TATNA CHAIRMAN	23.00	Х		Х				130,271	0	0
-	2.00 19.00									
(2) LORENZO SORIA PRESIDENT		Х		Х				130,022	0	0
(3) ALI SAR	19.00	Х		Х				93,242	0	0
VICE PRESIDENT	1.00			^				93,242	U	U
(4) JANET R NEPALES	19.00	Х		Х				75 055	0	0
TREASURER	1.00			^				75,855	0	0
(5) RUBEN V NEPALES	19.00	Х		Х				50,982	0	0
EXECUTIVE SECRETARY	1.00									
(6) LUCA CELADA	18.00	Х						86,672	0	0
DIRECTORS	2.00									
(7) ANKE HOFMANN DIRECTORS	13.00	Х						73,763	0	0
(8) DIEDERIK VAN HOOGSTRATEN	8.00									
DIRECTORS	2.00	Х						15,160	0	0
(9) YORAM KAHANA DIRECTORS	3.00	х						31,547	0	0
(10) TINA JOHNK CHRISTENSEN DIRECTORS	13.00	х						37,390	0	0
(11) GREGORY P GOECKNER	2.00 40.00									
CHIEF OPERATING OFFICER	1.00				Х			284,443	0	8,865
(12) ZOYA MALINSKAYA FINANCIAL MANAGER	40.00					х		128,800	0	3,975

Pa	Section A. Officers, Direction	ctors, Trustee	s, Key	Emp	oloy	ees	s, and	Hig	ghest C	ompensa	ted Employees	s (co	ntinued)	
	( <b>A)</b> Name and title	(B) Average hours per week (list any hours for	more pers	than on is	one botl	not bo: h ar	checl x, unle n office rustee	ess er	Repo compo fro organiz	ortable ensation m the	(E) Reportable compensation from related organizations		Estim Estim amount o compen from	ated of other sation the
		related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/109	9-MISC)	(W-2/1099- MISC)		organizat relat organiz	ed
	Sub-Total			•	•		<b>*</b>				<u> </u>			
	Total (add lines 1b and 1c)				<u>:                                    </u>		•		1	,138,147		0		12,840
2	Total number of individuals (includ \$100,000 of reportable compensat					d al	bove)	who	receive	d more tha	n			
_	Did the association list and form	£6:			1					<b>.</b>			Yes	No
3	Did the organization list any <b>forme</b> on line 1a? <i>If "Yes," complete Sched</i>	•			, key	y er		e, o •	r nignes	• • •	ated employee	3		No
4	For any individual listed on line 1a, organization and related organization		•							•				
	individual										· ·	4	Yes	
5	Did any person listed on line 1a re- services rendered to the organizat										r individual for	5		No
S	ection B. Independent Contr	actors												
1	Complete this table for your five h compensation from the organizatio	ighest compens											tax year	
	Name	(A) and business addre	ess							Desc	(B) ription of services		Compe	
	TILLA INC									WEBSITE DE	VELOPMENT			446,769
PASA	S LAKE AVE 606 ADENA, CA 91101 HAM & WATKINS LLP									LEGAL SERV	ICES			366,605
1025	50 CONSTELLATION BLVD3RD FL										-			, , , , , , , , , , , , , , , , , , , ,
	ANGELES, CA 90067 BEVERLY HILTON									EVENT SERV	ICES			358,132
	S WILSHIRE BLVD ERLY HILLS, CA 90210													

MRC MEDIA LLC EVENT SERVICES 264,140 1540 BROADWAY 32ND FL NEW YORK, NY 10036 BRILLIANT CONSULTING GROUP EVENT SERVICES 113,074 11827 ADDISON ST VALLEY VILLAGE, CA 91607 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization  $\triangleright$  5

		0 (2019)								Page <b>S</b>
Part	VII					rnanca ar nata ta	any line in this Pa	<del>d</del> \/III		г
		CHECK II SCHE	aure	Contain	s a res	ponse of note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1	<ul> <li>a Federated camp</li> <li>b Membership du</li> <li>c Fundraising eve</li> <li>d Related organiz</li> <li>e Government grants</li> </ul>	es . ents atio		1a 1b 1c 1d 1e	1,254		, 51,51,62		322 32:
O R		f All other contributio and similar amount above Noncash contributio lines 1a - 1f:\$	s not	included	1f 1g					
	╝	<b>h Total.</b> Add lines	1a-	1f	•	•	1,254	1	_	
						Business Code	30,395,508			30,395,508
an		GOLDEN GLOBES AWA	ARD S	SHOW		711300	500,050		500,050	
Program Service Revenue	Ł	SPONSORSHIP				711300	300,030		300,030	
vice	c									
Ser	c	i								
ogran	•									
ď		f All other program	SAT	vice reveni	10					
		Total. Add lines				30,895,558				
	3 of 4	Investment income ther gincumateves Royalties	e (in	cluding div	idends xempt		506,04	8		506,048
	3	Royalties		(i) Re		(ii) Personal				
	6a	Gross rents	6a							
	ь	Less: rental	6b							
	С	expenses Rental								
		income or d (Net <sup>s</sup> rental incom	<b>6c</b> e or	(loss).						
				(i) Secu		(ii) Other				
	<b>7</b> a	Gross amount from sales of assets other than inventory	7a							
	b	Less: cost or other basis and sales expenses	7b							
		Gain or (loss)  d Net gain or (loss)	<b>7c</b>		<u> </u>					
Other Revenue	88	a Gross income from fu (not including \$ contributions reported See Part IV, line 18 b Less: direct expe	d on l	of line 1c).	8a 8b		_			
r Re		<b>c</b> Net income or (lo				events				
Othe	ı	Gross income from activities. See Part IV, line 16 b Less: direct expe	L9 ense	 s	9a 9b	vities				
	10	<b>a</b> Gross sales of inv returns and allow	vent	ory, less	10a					
		<b>b</b> Less: cost of goo <b>c</b> Net income or (lo			10b of inve					
						<b>•</b>				
	1:	Miscellaneo <sup>1a</sup> MISC. INCOME		kevenue		Business Code 71130	0 13,71	5		13,715
		b								
	•	c								
		<b>d</b> All other revenue <b>e Total.</b> Add lines		 -11d			13,71	5		
	12	2 Total revenue. Se	ee in	structions			31,416,57		0 500,050	30,915,271

Forr	n 990 (2019)				Page <b>10</b>
Pa	art IX Statement of Functional Expenses				
	Section $501(c)(3)$ and $501(c)(4)$ organizations must	•	-	·	ete column (A)
	Check if Schedule O contains a response or note to	any line in this Part	IX		🗆
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	4,375,891			
2	Grants and other assistance to domestic individuals. See Part IV, line 22	5,000			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	250,000			
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	753,280			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	3,096,147	I		
	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	24,624			
9	Other employee benefits	130,940			
10	Payroll taxes	311,181			
11	Fees for services (non-employees):				_
а	Management				_
b	Legal	606,617			
c	Accounting	104,296			_
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	562,961			
12	Advertising and promotion	242,179	ĺ	ĺ	
	Office expenses	118,204			
	Information technology	586,576			
	Royalties	,			
	Occupancy				
	Travel	911,285			
	Payments of travel or entertainment expenses for any federal, state, or local public officials .	311,200			
19	Conferences, conventions, and meetings	431,281			
	Interest				
	Payments to affiliates				
	Depreciation, depletion, and amortization	58,727			
	Insurance	70,945			
	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	a FEDERAL & CALIFORNIA UB	107,011			
	<b>b</b> BANQUET	567,743			
	c PRODUCTION COSTS: GG	279,857			
	d INSTALLATION OF BOARD	260,648			
	e All other expenses	1,268,258			
25	<b>Total functional expenses.</b> Add lines 1 through 24e	15,123,651			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).				

Forr	n 990	(2019)					Page <b>11</b>		
Р	art X	Balance Sheet							
		Check if Schedule O contains a response or	note to	any line in this Part IX .			🗆		
					(A) Beginning of year		(B) End of year		
	1	Cash-non-interest-bearing			4,726,881	1	11,730,611		
	2	Savings and temporary cash investments			54,970,637	2	48,676,685		
	3	Pledges and grants receivable, net			3				
	4	Accounts receivable, net	·						
	5	Loans and other payables to any current or fo key employee, creator or founder, substantial controlled entity or family member of any of t Loans and other receivables from other disqu	butor, or 35% ersons		5				
		under section $4958(f)(1)$ ), and persons desc	n section 4958(c)(3)(B)		6				
12	7	Notes and loans receivable, net				7			
ssets	8	Inventories for sale or use				8			
As	9	Prepaid expenses and deferred charges .				9			
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	19,352,479					
	b	Less: accumulated depreciation	10b	750,256	2,519,077	<b>10</b> c	18,602,223		
	11	Investments—publicly traded securities .				11			
	12	Investments—other securities. See Part IV, li		12					
	13	Investments—program-related. See Part IV, I		13					
	14	Intangible assets		14					
	15	Other assets. See Part IV, line 11	Other assets. See Part IV, line 11						
	16	Total assets: Add lines 1 through 15 (must e	qual lir	ne 34)	62,716,595	16	79,009,519		
	17	Accounts payable and accrued expenses .				17			
	18	Grants payable				18			
	19	Deferred revenue	· · ·						
	20	Tax-exempt bond liabilities				20			
S		Escrow or custodial account liability. Comple		IV of Schedule D		21			
Liabilities	22	Loans and other payables to any current or fo key employee, creator or founder, substantial controlled entity or family member of any of t	butor, or 35%		22				
- 10	22		-			22			
	23	Secured mortgages and notes payable to unre				23			
	24 25	Unsecured notes and loans payable to unrela Other liabilities (including federal income tax parties, and other liabilities not included on I	oles to related third		24 25				
	26	Complete Part X of Schedule D <b>Total liabilities.</b> Add lines 17 through 25.			0	26	0		
S		Organizations that follow FASB ASC 958, che		and complete					
Fund Balances	27	lines 27, 28, 32, and 33.  Net assets without donor restrictions	ck lier	and complete		27			
P	28	Net assets with donor restrictions				28			
FE		Organizations that do not follow FASB ASC 9	58, che	eck here 🕨 🔽 and					
Assets or F	29	complete lines 29 through 33. Capital stock or trust principal, or current fun	ds .		0	29	0		
ets	30	Paid-in or capital surplus, or land, building or	equipm	nent fund	0	30	0		
ASS	31	Retained earnings, endowment, accumulated	income	, or other funds	62,716,595	31	79,009,519		
	32	Total net assets or fund balances			62,716,595	32	79,009,519		
Net	33	Total liabilities and het assets/fund balances			62.716.595	33	79.009.519		

62,716,595

33

79,009,519

Form **990** (2019)

Total liabilities and net assets/fund balances

33

of the audit, review, or compilation of its financial statements and selection of an independent accountant?

**b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the За Single Audit Act and OMB Circular A-133?

Νo

Form 990 (2019)

3b

Form 990 (2019)		
Additional Data		Return to Form
	Software ID:	
	Software Version:	
Form 990, Special Condition Descripti	ion:	
	Special Condition Description	

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

Department of the Treasury

Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527

**Political Campaign and Lobbying Activities** 

OMB No. 1545-0047

Open to Public Inspection

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C. Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B. Section 527 organizations: Complete Part I-A only. If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B. Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of the organization **Employer identification number** HOLLYWOOD FOREIGN PRESS ASSOCIATION 95-6191816 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") 2 Political campaign activity expenditures (see instructions) ...... Volunteer hours for political campaign activities (see instructions) ...... Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 ...... 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ...... 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ..... ☐ Yes Was a correction made? ..... Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... 1 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b.......... Did the filing organization file Form 1120-POL for this year? ..... ☐ Yes □ No 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (b) Address (a) Name (c) EIN (d) Amount paid from (e) Amount of filing organization's political contributions funds. If none, enter received and -0-. promptly and directly delivered to a separate political organization. If none, enter -0-. 5 For Paperwork Reduction Act Notice, see the instructions for Form 990 or 990-EZ. Cat. No. 50084S Schedule C (Form 990 or 990-EZ) 2019

Page 3

Amount

Complete if the organization is exempt under section 501(c)(3) and has	NOT
filed Form 5768 (election under section 501(h)).	

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity. Yes | No

During the year, did the filing organization attempt to influence foreign, national, state or local 1

legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

Volunteers?

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? .......

Media advertisements? .....

Mailings to members, legislators, or the public? ..... Publications, or published or broadcast statements? .....

Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? .....

h

Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? ...... Other activities?

Total. Add lines 1c through 1i ..... Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? ..... If "Yes," enter the amount of any tax incurred under section 4912 ...... If "Yes," enter the amount of any tax incurred by organization managers under section 4912 ......

2a

If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? ..... Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

Were substantially all (90% or more) dues received nondeductible by members? ..... Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....

3 Did the organization agree to carry over lobbying and political expenditures from the prior year? ..... Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or se

501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part line 3, is answered "Yes."

Dues, assessments and similar amounts from members ...... 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).

Current year ..... Carryover from last year

Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues . 3 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? .....

Taxable amount of lobbying and political expenditures (see instructions) ...... Part IV

Return Reference

**Supplemental Information** Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Explanation

1

2a

2b 2c

3

4

Schedule C (Form 990 or 990EZ) 2019





Yes	
	N
ectio	n
t III	-A,

### **SCHEDULE D**

Department of the Treasury Internal Revenue Service

Name of the organization

(Form 990)

### **Supplemental Financial Statements**

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

Attach to Form 990. ▶ Go to <u>www.irs.gov/Form990</u> for instructions and the latest information. OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** 

HOI	LLYWOOD FOREIGN PRESS ASSOCIATION					5-619	1816	
Pa	rt I Organizations Maintaining Donor A	Advised Funds	or	Other Sin				
	Complete if the organization answered				ne 6.			
	Table of a standard or	(a) Dono	or ad	lvised funds		(b)	Funds and oth	er accounts
1	Total number at end of year							
2	Aggregate value of contributions to (during year)							
3	Aggregate value of grants from (during year)							
4	Aggregate value at end of year							
5	Did the organization inform all donors and donor added the organization's property, subject to the organization	-					_	Yes No
6	Did the organization inform all grantees, donors, and charitable purposes and not for the benefit of the do impermissible private benefit?	nor or donor advis	or, c	or for any oth	her purpose	conferri	•	Yes No
Pa	rt II Conservation Easements.  Complete if the organization answered	"Yes" on Form 9	990,	Part IV, lir	ne 7.			
1	Purpose(s) of conservation easements held by the conservation of land for public use (e.g., recreat	-	_			toricall	y important la	nd area
	Protection of natural habitat			Preservati	ion of a cert	ified hi	storic structur	·e
	Preservation of open space							
2	Complete lines 2a through 2d if the organization he	ld a qualified cons	erva	ıtion contribı	ution in the			
_	easement on the last day of the tax year.  Total number of conservation easements				1 2		leld at the End	l of the Year
a b	Total acreage restricted by conservation easements				. 2			
Ü	· · · · · · · · · · · · · · · · · · ·	,			<u></u>			
c	Number of conservation easements on a certified his	storic structure in	clude	ed in (a)	2	С		
d	Number of conservation easements included in (c) a historic structure listed in the National Register . $$	•	5/06,	, and not on	a <b>2</b>	d		
3	Number of conservation easements modified, transfetax year	erred, released, ex	xting	juished, or te	erminated b	the or	ganization dur	ing the
4	Number of states where property subject to conserv	vation easement is	s loc	ated 🕨				
5	Does the organization have a written policy regarding violations, and enforcement of the conservation east					g of	_	□ No
6	Staff and volunteer hours devoted to monitoring, ins	specting, handling	of v	violations, an	nd enforcing	conserv		nts during the
	<u> </u>							
7	Amount of expenses incurred in monitoring, inspect  \$ \\$	ing, handling of vi	olati	ions, and enf	forcing cons	ervatio	n easements d	uring the year
8	Does each conservation easement reported on line (B)(i) and section 170(h)(4)(B)(ii)?	2(d) above satisfy	/ the	requiremen	its of section	n 170(h	)(4) <b>Yes</b>	□ No
9	In Part XIII, describe how the organization reports					nonco		
,	balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease	f the footnote to th					•	
Par	t III Organizations Maintaining Collecti Complete if the organization answered					Other	Similar As	sets.
1a	If the organization elected, as permitted under SFA works of art, historical treasures, or other similar as service, provide, in Part XIII, the text of the footno	ssets held for publ	ic ex	khibition, edu	ucation, or r	esearch	n in furtheranc	
b	If the organization elected, as permitted under SFA works of art, historical treasures, or other similar as service, provide the following amounts relating to the	ssets held for publ						
(	i) Revenue included on Form 990, Part VIII, line 1					1	<b>\$</b>	
	i) Assets included in Form 990, Part X · · · · · · ·							
2	If the organization received or held works of art, his following amounts required to be reported under SF	storical treasures,	or o	ther similar a	assets for fi			the
а	Revenue included on Form 990, Part VIII, line 1 .					1	<b>\$</b>	
b	Assets included in Form 990, Part X					1	\$	<del></del>
	Paperwork Reduction Act Notice, see the Instructions				Cat. No.		Schedule D	(Form 990) 201

Page 2

3	Using the organization's acquisition, access collection items (check all that apply):	ion, and ot	her records	s, check a	any of t	he follow	ing that	are a signi	ficant use o	f its	
а	Public exhibition			d 🗀	Loan	or exchai	nge prog	rams			
b	Scholarly research			e 🗀	Other						
c	Preservation for future generations										
4	Provide a description of the organization's of Part XIII.	collections a	and explain	how the	y furthe	er the org	janizatio	n's exempt	purpose in		
5	During the year, did the organization solicit assets to be sold to raise funds rather than								Yes	□ No	
Pa	rt IV Escrow and Custodial Arran Complete if the organization and Part X, line 21.			rm 990,	Part I	V, line 9	), or re	ported an	amount o	n Form	990,
1a	Is the organization an agent, trustee, custo included on Form 990, Part X?								Yes	□ No	
b	If "Yes," explain the arrangement in Part X	III and com	plete the f	ollowing	table:			-	Amount		_
c	Beginning balance					Ī	1c				_
d	Additions during the year					[	1d				_
е	Distributions during the year					Ī	1e				_
f	Ending balance					-	1f				_
2-	Did the organization include an amount on					-	dial acco	unt linhilitu	o∏ Ves	□ No	_
2a		FORM 990,	Part X, IIne	21, for 6	escrow	or custod	наг ассо	unt liability	/ Tes	140	
b	If "Yes," explain the arrangement in Part X	III. Check l	nere if the	explanati	on has	been pro	vided in	Part XIII	$\Box$		
Pa	rt V Endowment Funds.										
	Complete if the organization and							T	1		
	Danisarian of war balance	(a) Curre	ent year	(b) Prior	year	(c) Two y	ears back	(d) Three y	ears back (e)	Four yea	ars back
	Beginning of year balance										
	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships	1									
	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the cur	rrent year e	end balance	e (line 1g	, colum	n (a)) he	ld as:				
а	Board designated or quasi-endowment										
b	Permanent endowment										
c	Temporarily restricted endowment										
	The percentages on lines 2a, 2b, and 2c sh	nould equal	100%.								
3а	Are there endowment funds not in the posse	ession of th	e organiza	tion that	are held	d and adr	ministere	d for the		77	
	organization by: (i) unrelated organizations								3a(i)	Yes	No
	(ii) related organizations								3a(ii)	+	
b	If "Yes" on 3a(ii), are the related organizat		as required	l on Sche	dule R?	,			3b		
				_							
4	Describe in Part XIII the intended uses of t		ation's end	owment f	unds.						
Pa	rt VI Land, Buildings, and Equipm		oc" on Eo	rm 000	Dart I	V line 1	11a So.	o Form 00	O Dart V	lino 10	1
	Complete if the organization and Description of property (a) Cost or oth (investme	er basis	<b>(b)</b> Cost or					depreciation		Book valu	
	·										
1a	Land			17	,998,217					17	7,998,217
b	Buildings				719,055	<u> </u>		225,042			494,013
C	Leasehold improvements					<u> </u>					
d	Equipment				154,847			132,876			21,971

**Total.** Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

88,022

18,602,223

392,338

Part VII	Investments—Other Securities. Complete if the organization answered "Yes" on Form 9	90. Part IV	'. line	11b.See Form 9	90. Part	X. line 12.
	(a) Description of security or category (including name of security)	(b) Book value	<i>,</i> c	(c) Method	l of valuat	ion:
	al derivatives	10.00			7	
	-held equity interests					
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
(I)						
Total. (Colum	nn (b) must equal Form 990, Part X, col. (B) line 12.)  Investments—Program Related.	•				
VIII	Complete if the organization answered 'Yes' on Form 9	90, Part IV	, line			
	(a) Description of investment			(b) Book value		thod of valuation: end-of-year market value
(2)						74.40
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
Part IX	Other Assets. Complete if the organization answered 'Yes' on Form 99	00, Part IV,	line :	11d. See Form 990		
(2)	(a) Description					(b) Book value
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
Total. (Colu	mn (b) must equal Form 990, Part X, col.(B) line 15.)  Other Liabilities.				Þ	
Pail A	Complete if the organization answered 'Yes' on Form 99 See Form 990, Part X, line 25.	00, Part IV,	line :	11e or 11f.		
1.	(a) Description of liabil	lity				(b) Book value
	income taxes					
(2)						
(3)						
(5)						
(6)						
(7)						
(8)						
(9)						
	nn (b) must equal Form 990, Part X, col.(B) line 25.)			<b>•</b>		
organizatio	for uncertain tax positions. In Part XIII, provide the text of the fo					
XIII 🔽						

3

1

2

Part XII

Return.		
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
Tatal variance gains and other connect now audited financial statements	-	

1 Total revenue, gains, and other support per audited financial statements 🛭 . 2

Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains (losses) on investments . . .

Page 4

31,416,575

31,416,575

Donated services and use of facilities . . . . . . 2b h Recoveries of prior year grants . . . . . 2c

Investment expenses not included on Form 990, Part VIII, line 7b.

Total expenses and losses per audited financial statements . . . .

Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities . . . . . .

Other (Describe in Part XIII.) . . . . . . Add lines **4a** and **4b** . . . . . . . .

Prior year adjustments . . .

Add lines 4a and 4b . . . .

Other (Describe in Part XIII.) . . . . . . . Add lines 2a through 2d .

Subtract line **2e** from line **1** . . . . . . Amounts included on Form 990, Part VIII, line 12, but not on line 1:

3

1

4a 4b

2a

2b

2d

4c

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) . . . . . . Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

31,416,575 15,123,651

2c Other losses . . . . . Other (Describe in Part XIII.) 2d Add lines 2a through 2d . . 2e 3 3 Subtract line **2e** from line **1** . 15,123,651 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 4b Other (Describe in Part XIII.)

4c 15,123,651

Supplemental Information

Part XIII

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

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) . . .

2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. Return Reference Explanation

PART X, LINE 2:

IN ACCORDANCE WITH FINANCIAL ACCOUNTING STANDARDS BOARD ("FASB") ACCOUNTING STANDARDS CODIFICATION ("ASC") TOPIC NO. 740, "UNCERTAINTY IN INCOME TAXES" ("ASC 740"), THE ASSOCIATION RECOGNIZES THE IMPACT OF TAX POSITIONS IN THE FINANCIAL STATEMENTS IF THAT POSITION IS MORE LIKELY THAN NOT TO BE SUSTAINED ON AUDIT, BASED ON THE TECHNICAL MERITS OF THE POSITION. TO DATE, THE ASSOCIATION HAS NOT RECORDED ANY UNCERTAIN TAX POSITIONS. THE ASSOCIATION RECOGNIZES POTENTIAL ACCRUED INTEREST AND PENALTIES RELATED TO UNCERTAIN TAX POSITIONS IN INCOME TAX EXPENSE. DURING THE YEAR END JUNE 30, 2020, THE ASSOCIATION DID NOT RECOGNIZE ANY AMOUNT IN POTENTIAL INTEREST AND PENALTIES ASSOCIATED WITH UNCERTAIN TAX POSITIONS. AS OF JUNE 30, 2020, THE OPEN FEDERAL AND STATE TAX RETURNS SUBJECT TO EXAMINATION WERE FOR THE YEARS 2017 TO 2019 AND 2016 TO 2019, RESPECTIVELY.

SCHEDULE F (Form 990)		Statement of Activities Outside the United States  ► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.  ► Attach to Form 990.									
	ment of the Treasury  I Revenue Service	► Go to www.irs.gov/Form990 for instructions and the latest information.									
	e of the organization		SOCIATION				Employer iden				
	ETWOOD TOKETO	N TRESS AS	3001/(10)(				95-6191816				
Pa			on on Activit art IV, line 14		the United States. C	Complete	e if the organi				
2	For grantmakers. Does the organization maintain records to substantiate the amount of its grants of the assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?										
3	Activites per Reg	ion. (The follo	wing Part I, line	3 table can be	duplicated if additional sp	pace is n	eeded.)				
	(a) Region		<b>(b)</b> Number of offices in the region	(c) Number of employees, agents and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	program sp	vity listed in (d) is an an arrived an arrived an arrived an arrived an arrived arrive				
(1)											
( 2)											
(3)											
(4)											
( 5)											
( 6)											
(7)											
(8)											

(9)

10)
( 11)
( 12)
( 13)
( 14)
( 15)
( 16)
( 17)

3a Sub-total . . .

to Part I .

**b** Total from continuation sheets

c Totals (add lines 3a and 3b)

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

identification number
816
ganization answered

Ints
Used

Yes

Grants and other

(f) Total expenditures for and investments in the region

0

0

Schedule F (Form 990) 2019

Cat. No. 50082W

OMB No. 1545-0047

2019
Open to Public Inspection

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	<b>(g)</b> Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM	FILM RESTORATION	25,000	WIRE			
( 2)								
( 3)								
( 4)								
( 5)								
( 6)								
(7)								
( 8)								
( 9)								
( 10)								
( 11)								
( 12)								
( 13)								
( 14)								
( 15)								
( 16)								
	her of recinie	l nt organizations liste	<u>l</u> ed above that are r	 ecognized as charitie	s by the foreign cou	intry recognized a	<u></u>	

(2) (3) (4) (5) (6) (7) (8) (9)

10) 11)

( 12)

13) ( 14)

( 15)

16) ( 17)

18)

Schedule F (Form 990) 2019

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (b) Pogion (c) Number of (d) Amount of

assistance	(b) Region	recipients	cash grant	disbursement	noncash	of noncash	valuation
					assistance	assistance	(book, FMV, appraisal, other)
(1)							

Sche	edule F (Form 990) 2019	Page <b>4</b>
Par	rt IV Foreign Forms	
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	<b>▼</b> N o
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)	<b>✓</b> N o
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)	<b>✓</b> N o
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).	<b>✓</b> N o
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)	<b>✓</b> N o
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)	<b>✓</b> No

Schedule F (Form 990) 2019

Schedule F (Form 990) 2019	Page <b>5</b>
method; amounts of inve (accounting method); and	equired by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting stments vs. expenditures per region); Part II, line 1 (accounting method); Part III d Part III, column (c) (estimated number of recipients), as applicable. Also complete dditional information. See instructions.
ReturnReference	Explanation
PART III ACCOUNTING METHOD:	
-	
	Schedule F (Form 990) 2019

# Additional Data Software ID: Software Version:

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No. 1545-0047 Schedule I **Grants and Other Assistance to Organizations,** (Form 990) **Governments and Individuals in the United States** Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Department of the Attach to Form 990. Treasury Internal Revenue Service Go to <u>www.irs.gov/Form990</u> for the latest information. Name of the organization **Employer identification number** HOLLYWOOD FOREIGN PRESS ASSOCIATION 95-6191816 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (f) Method of (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant (if applicable) organization valuation noncash assistance or assistance grant cash or government (book, FMV, appraisal, assistance other) (1) ACTORS GANG INC 95-4226223 501(C)(3) 20,000 AFTER-SCHOOL/SUMMER 9070 VENICE THEATER PROGRAM FOR BOULEVARD KIDS CULVER CITY, CA 902322305 GENERAL SUPPORT (2) AITYSH USA 47-3362394 501(C)(3) 10,000 3452 MIDVALE AVE LOS ANGELES, CA 90034 SUPPORT FOR GOLDEN (3) AMERICAN 95-3902004 60,000 501(C)(3 GLOBES FOREIGN FILM CINEMATHEOUE 6712 HOLLYWOOD BLVD LOS ANGELES, CA 90028 DOCUMENTARY (4) AMERICAN 13-3447752 501(C)(3) 30,000 SCREENINGS/DIALOGUES **DOCUMENTARY INC** 20 JAY ST 940 IN LA BROOKLYN, NY 11201 20-1400322 (5) AMERICAN FRIENDS 501(C)(3) 20,000 ONE TIME OF TIFF CONTRIBUTION TO TIFF 200 DELAWARE AVE STE TO COVER PROJECT -2017 BUFFALO, NY 142022107 (6) CAL STATE FULLERTON FELLOWSHIP 33-0567945 501(C)(3) 15,000 PHILANTHROPIC FOUNDATION 2600 NUTWOOD AVE STE 850 FULLERTON, CA 928315455 (7) CALIFORNIA STATE 95-2543028 SCHOLARSHIPS 15,000 501(C)(3) UNIVERSITY DOMINGUEZ HILLS FOUNDATION 1000 E VICTORIA ST WH 360 CARSON, CA 907470001 IN HONOR OF RYAN (8) CHILDREN'S HOSPITAL 95-1690977 501(C)(3) 35,000 LOS ANGELES MURPHY 4650 SUNSET BLVD MS 29 LOS ANGELES, CA 90027 (9) ENSEMBLE STUDIO 95-4890358 501(C)(3) 25,000 FILM EQUIPMENT THEATRE THE L A **PROJECT** 137 N LARCHMONT BLVD LOS ANGELES, CA 900043704 (10) FILM INDEPENDENT 95-3943485 501(C)(3) 305,000 FILM INDEPENDENT INC PRESENTS PROGRAM 5670 WILSHIRE BOULEVARD 9TH FLOOR LOS ANGELES, CA 900365679 (11) FILM NOIR 74-3134304 90,000 **GRANT PROJECT** 501(C)(3) FOUNDATION "TRAPPED" (COMPLETION OF "LA BESTIA DEBE 1411 PARU ST ALAMEDA, CA 94501 MORIR" RESTORATION) (12) GET LIT WORDS FILMMAKER STUDIO RUN 26-4644018 501(C)(3) 10,000 BY AT-RISK YOUTH IGNITE INC 672 S LA FAYETTE PARK PL STE 10 LOS ANGELES, CA 90057 (13) HOLLYWOOD 95-3511852 501(C)(3) 10,000 SUMMER FILM HERITAGE MUSEUM SCREENINGS AT LASKY-2100 N HIGHLAND AVE DEMILLE LOS ANGELES, CA 900683241 (14) INDIAN FILM 73-1650230 501(C)(3) 5,000 GENERAL SUPPORT FESTIVAL OF LA 5225 WILSHIRE BLVD SUITE 617 LOS ANGELES, CA 90036 (15) LA PLAZA DE 75-3059288 501(C)(3) 10,000 PROFESSIONAL DEVELOPMENT FOR CULTURA Y ARTES 501 N MAIN ST LATIONO FILMMAKERS LOS ANGELES, CA 90012 RESTORATION OF LGBTQ (16) LABORATORY FOR 13-3298768 501(C)(3) 5,000 ICON & IDIOM INC -**FILMS** INDIFCOLLECT 675 THIRD AVE 32ND FLOOR NEW YORK, NY 10017 (17) LATIN-AMERICAN 95-4784470 501(C)(3) 20,000 SCREENINGS AT PUBLIC **VENUES & STUDENT FILM** CINEMATECA OF LA 2652 WORKMAN ST **FESTIVAL** LOS ANGELES, CA 900312329 (18) LIBRARY 95-4368250 501(C)(3) 40,000 FILM SERIES AT FOUNDATION OF LA DOWNTOWN PUBLIC 630 W 5TH STREET LIBRARY LOS ANGELES, CA 90071 (19) LOS ANGELES 95-3273046 CLASSIC FILM 501(C)(3) 35,000 CONSERVANCY SCREENINGS IN 523 WEST SIXTH STREET DOWNTOWN LA 826 LOS ANGELES, CA 90014 FILM SCREENINGS, (20) MUSEUM OF THE 11-2730714 10,000 501(C)(3) MOVING IMAGE **EXHIBITIONS AND EDUCATION** 36-01 35TH AVE ASTORIA, NY 11106 STUDENT MEMBERSHIPS (21) NEWFILMMAKERS 26-4286940 501(C)(3) 10,000 LOS ANGELES 1438 N GOWER ST STE 83 LOS ANGELES, CA 90028 (22) OUTFEST RESTORE/REBUILD 95-4089601 501(C)(3) 35,000 3470 WILSHIRE BLVD STE WEBSITE 935 LOS ANGELES, CA 90010 (23) POPS THE CLUB PRE-PROFESSIONAL 46-4535915 501(C)(3) 10,000 1625 WEST OLYMPIC **EDUCATION &** BLVD SUITE 500 MENTORING LOS ANGELES, CA 90015 (24) SAN FRANCISCO GENERAL SUPPORT 94-3170215 501(C)(3) 20,000 SILENT FILM FESTIVAL 1687 MARKET ST SAN FRANCISCO, CA 941031237 (25) SANTA MONICA 95-6047779 501(C)(3) 15,000 PURCHASE OF 4K COLLEGE CAMERA & EQUIPMENT 2714 PICO BLVD 230 SANTA MONICA, CA 904051918 (26) STREETLIGHTS 95-4499501 501(C)(3) 10,000 NEW DESKS & COMPUTER PRODUCTION ASSISTANT EQUIPMENT PROGRAM INC 12100 WILSHIRE BLVD STE 154 LOS ANGELES, CA 900257139 (27) UC BERKELEY FILM SUPPORT FOR 94-6002123 501(C)(3) 30,000 INTERNATIONAL ARCHIVE 2195 HEARST AVE RM 120 FILMMAKER PROGRAM MC 1104 BERKLEY, CA 947201083 (28) YOUNG MUSICIANS 95-2250007 501(C)(3) 10,000 GENERAL SUPPORT **FOUNDATION** 1844 CYPRESS AVENUE 101 LOS ANGELES, CA 90065 (29) AMERICAN FILM 52-6072925 501(C)(3) 20,000 FELLOWSHIP ÎNSTITUTE 2021 NORTH WESTERN LOS ANGELES, CA 90027 (30) CALIFORNIA FELLOWSHIP 95-6102146 501(C)(3) 12,500 INSTITUTE OF THE ARTS 24700 MCBEAN PKWY VALENCIA, CA 913552340 (31) CAL STATE FELLOWSHIP 95-6106694 501(C)(3) 15,000 UNIVERSITY LONG BEACH FOUND 6300 E STATE UNIVERSITY DR STE 332 LONG BEACH, CA 908154670 (32) CALIFORNIA STATE 501(C)(3) FELLOWSHIP 95-4044252 5,300 UNIVERSITY LOS ANGELES FOUNDATION 5151 STATE UNIVERSITY DR ADM NO 514 LOS ANGELES CA 900324226 (33) LOYOLA 95-1643334 501(C)(3) 20,000 FELLOWSHIP MARYMOUNT UNIVERSITY 1-LMU DRIVE U-HALL LOS ANGELES, CA 900452650 (34) MT SAN ANTONIO 95-6196020 501(C)(3) 15,000 GENERAL SUPPORT COLLEGE FOUNDATION 1100 N GRAND AVE WALNUT, CA 917891341 (35) UNIVERSITY OF SUPPORT OF FILM 37-6006007 10,000 501(C)(3) ILLINOIS FOUNDATION **FESTIVAL** 1305 W GREEN STREET URBANA, IL 618012900 (36) CALIFORNIA STATE GG POSTER EXHIBIT IN 95-6196006 501(C)(3) 22,000 UNIVERSITY HFPA WING/MANZANITA NORTHRIDGE HALL FOUNDATION 18111 NORDHOFF ST NORTHRIDGE, CA 913308296 100,000 (37) FILMAID 76-0722433 501(C)(3) KENAY REFUGEE INTERNATIONAL PROGRAM 234 5TH AVE RM 206 NEW YORK, NY 100017605 (38) GINGOLD 06-1764976 501(C)(3) 30,000 SUPPORT OF GB SHAW THEATRICAL GROUP **PRODUCTIONS** 4 MANHATTANVILLE RD PURCHASE, NY 105772139 (39) LOLLIPOP THEATER SCREENINGS FOR 04-3700586 20,000 501(C)(3) **NETWORK** CHILDREN IN SOCAL 7461 BEVERLY BLVD STE HOSPITALS 304 LOS ANGELES, CA 900362773 (40) THE PABLOVE 26-3006100 501(C)(3) 20,000 PHOTO PROJECT FOR FOUNDATION YOUTH WITH CANCER 6607 WEST SUNSET BLVD LOS ANGELES, CA 90028 (41) YOUNG 55-0827731 501(C)(3) 10,000 STORYTELLING, WRITING AND PLAY PRODUCTION STORYTELLERS FOR INNER-CITY KIDS FOUNDATION 923 E 3RD ST STE 307 LOS ANGELES, CA 90013 (42) STORYVILLE CENTER 13-3880953 105,000 LA-BASED MAINSTAGE 501(C)(3) FOR THE SPOKEN WORD STORYTELLING 75 ROAD ST STE 2601 **EVENINGS FOR** NEW YORK, NY NATIONWIDE RADIO 100042482 COMIC-CON MUSEUM (43) SAN DIEGO COMIC 95-3072188 5,000 501(C)(3) CONVENTION 225 BROADWAY STE 1800 SAN DIEGO, CA 921015027 (44) POLISH AMERICAN 20-3076804 501(C)(3) 5,000 GENERAL SUPPORT FILM SOCIETY 2100 N BEACHWOOD DR **APT 314** LOS ANGELES, CA 900683446 (45) FRIEND OF GOETHE 95-4620262 501(C)(3) 5,000 GERMAN CURRENTS FILM OF SOUTHERN FESTIVAL CALIFORNIA 811 WEST 7TH STREET LOS ANGELES, CA 900173408 (46) SMITHSONIAN 53-0206027 501(C)(3) 150,000 TWENTY YEAR EXHIBIT: INSTITUTION HISTORY OF 1000 JREFFERSON DRIVE ENTERTAINMENT WASHINTONG, DC 20560 (47) AFTER-SCHOOL ALL-GENERAL SUPPORT 95-4441208 20,000 501(C)(3) STARS 5900 WILSHIRE BLVD **SUITE 2000** LOS ANGELES, CA 90036 (48) ISRAFEST 13-3137819 501(C)(3) 5,000 GENERAL SUPPORT **FOUNDATION** 324 S BEVERLY DRIVE 424 BEVERLY HILLS, CA 902124801 (49) FILM FOUNDATION 95-4244945 501(C)(3) 350,000 FILM RESTORATION 7920 WEST SUNSET BLVD 6TH FLOOR LOS ANGELES, CA 90046 (50) SAVE THE CHILDREN 06-0726487 501(C)(3) 25,000 GENERAL SUPPORT FEDERATION 501 KINGS HIGHWAY EAST SUITE 400 FAIRFIELD, CT 06825 (51) ARPA FOUNDATION 95-4556837 501(C)(3) 5,000 GENERAL SUPPORT FOR FILM MUSIC AND ARTS 2919 MAXWELL ST LOS ANGELES, CA 900272510 GENERAL SUPPORT (52) AMERICAN 13-6151807 501(C)(3) 100,000 AUSTRALIAN ASSOCIATION 50 BROADWAY STE 2003 NEW YORK, NY 100043813 (53) THE FEED 41-2271492 501(C)(3) 50,000 SRI LANKA SCHOOL FOUNDATION FEEDING PROGRAM 420 W 14TH ST STE 6NE NEW YORK, NY 100141014 (54) PROJECT ANGEL 95-4115863 100,000 GENERAL SUPPORT 501(C)(3) FOOD 922 VINE STREET LOS ANGELES, CA 90038 (55) UCLA FOUNDATION 10,000 GENERAL SUPPORT 95-2250801 501(C)(3) 10889 WILSHIRE BLVD **SUITE 1100** LOS ANGELES, CA 90024 (56) LOS ANGELES PRESS 01-0761875 501(C)(3) 100,000 GENERAL SUPPORT CLUB 6464 W SUNSET BLVD STE 870 LOS ANGELES, CA 900288041 (57) CALIFORNIA STATE 95-4044252 501(C)(3) 10,000 GENERAL SUPPORT UNIVERSITY OF LOS ANGELES 5151 STATE UNIVERSITY DR ADM NO 514 LOS ANGELES, CA 900324226 (58) LOS ANGELES CITY 95-6207819 10,000 GENERAL SUPPORT 501(C)(3) COLLEGE FOUNDATION 855 N VERMONT AVE LOS ANGELES, CA 900293516 (59) COMMUNITY GENERAL SUPPORT 95-4302067 10,000 501(C)(3) **PARTNERS** 1000 N ALAMEDA ST SUITE 240 LOS ANGELES, CA 900121804 501(C)(3) GENERAL SUPPORT (60) SOUTHERN 95-4765734 20,000 CALIFORNIA PUBLIC RADIO 474 SOUTH RAYMOND AVENUE PASADENA, CA 91105 95-3967876 (61) SCREEN ACTORS 501(C)(3) 5,000 GENERAL SUPPORT GUILD - AMERICAN FEDERATION OF TELEVISION AND RADIO 5757 WILSHIRE BLVD SUITE PH1 LOS ANGELES, CA 90036 GENERAL SUPPORT (62) A PLACE CALLED 95-4427291 10,000 501(C)(3) HOME 2830 SOUTH CENTRAL AVENUE LOS ANGELES, CA 90011 (63) KIDS IN THE 35-2364726 501(C)(3) 10,000 GENERAL SUPPORT **SPOTLIGHT** 145 S GLEN OAKS BLVD 124 BURBANK, CA 915021315 (64) ECHO PARK FILM 56-2513637 501(C)(3) 5,000 GENERAL SUPPORT CENTER 1200 N ALVARADO ST LOS ANGELES, CA 900263127 (65) GIVE2ASIA 94-3373670 5,000 GENERAL SUPPORT 501(C)(3) 2201 BROADWAY 4TH FLOOR OAKLAND, CA 94612 GENERAL SUPPORT (66) PEN AMERICA LOS 95-3502910 10,000 501(C)(3) **ANGELES** 8444 WILSHIRE BLVD 4TH FL BEVERLY HILLS, CA 902113200 GENERAL SUPPORT (67) SHAREWELL 20-1470992 501(C)(3) 10,000 395 SANTA MONICA PLACE SUITE 374 SANTA MONICA, CA 90401 (68) VETERANS IN MEDIA 80-0805473 GENERAL SUPPORT 501(C)(3) 10,000 & ENTERTAINMENT 1237 S CRESCENT HEIGHTS BLVD LOS ANGELES, CA 900352636 (69) WOMEN FOR WOMEN 45-3078553 501(C)(3) 5,091 GENERAL SUPPORT PO BOX 31167 GREENVILLE, N C 278331167 GENERAL SUPPORT (70) MACDOWELL 13-1592242 501(C)(3) 5,000 COLONY 100 HIGH STREET PETERBOROUGH, NH 03458 (71) INDIECOLLECT 55,000 RESTORATION OF 13-3298768 501(C)(3) 675 THIRD AVENUE 32ND NOTEWORTHY AFRICAN FLOOR AMERICAN FILMS PENTHOUSE NEW YORK, NY 10017 (72) LAS FOTOS HIRE HER JOB SKILLS ENTERPRISE 95-4302067 501(C)(3) 10,000 PROGRAM FOR LATINO 2658 PASADENA AVE YOUTH IN BOYLE LINCOLN HEIGHTS, CA 90031 HEIGHTS 95-2250801 (73) UCLA SCHOOL OF 501(C)(3) 20,000 FELLOWSHIP THEATER FILM AND TV BOX 951622 LOS ANGELES, CA 90095 (74) HOLLYWOOD 95-3735188 501(C)(3) 1,900,000 CHARITIES TO FOREIGN PRESS ENTERTAINMENT ASSOCIATION RELATED CHARITABLE TRUST ORGANIZATIONS 646 N ROBERTSON BLVD WEST HOLLYWOOD, CA 90069 (75) WOMEN IN FILM GENERAL SUPPORT 23-7322834 501(C)(3) 10,000 4221 WILSHIRE BLVD SUITE 130 LOS ANGELES, CA 90010 (76) MOTION PICTURE GENERAL SUPPORT 95-1652916 501(C)(3) 10,000 AND TV FUND 23388 MULHOLLAND DRIVE HILLS LOS ANGELES, CA 91364 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 76 . . . . . . . . . . . . . . . . . . For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50055P Schedule I (Form 990) 2019

Page 2

(1)			

(a) Type of grant or assistance

(2) (3) (4)

(5)

(6)

(7)

Part IV

Return Reference

PART I, LINE 2:

Explanation

Part III can be duplicated if additional space is needed.

FOR APPROVAL AND THEN FOR A FULL MEMBERSHIP APPROVAL.

(c) Amount of

cash grant

THE ORGANIZATION RETAINS AN INDEPENDENT CONSULTANT TO REVIEW ALL GRANT APPLICANTS. AFTER REVIEWING THE APPLICATIONS. AND CONFIRMING THE EXEMPTION STATUS OF EACH APPLICANT. THE CONSULTANT MAKES HIS/HER RECOMMENDATIONS TO THE GRANT MAKING COMMITTEE. THE GRANT MAKING COMMITTEE, AFTER APPROVAL, SUBMITT THE RECOMMENDATIONS TO THE BOARD OF DIRECTORS

(d) Amount of

noncash assistance

(e) Method of valuation

(book, FMV, appraisal, other)

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

Schedule I (Form 990) 2019

(b) Number of

recipients

Schedule J (Form 990)		Com	pensa	tion Information		OMB No.	1545-	0047
(For		For certain Officers, I  Complete if the organiz	Directors, Compenseation ans	Trustees, Key Employees, and High sated Employees wered "Yes" on Form 990, Part IV, h to Form 990. or instructions and the latest inforn	line 23.	2019 Open to Public		
	I Revenue Service	Go to <u>www.irs.gov/re</u>	<u> </u>	or instructions and the latest inform	nation.		ectio	
	me of the organi				Employer identi			
HOL	LYWOOD FOREIGN F	PRESS ASSOCIATION			95-6191816			
Pa	rt I Questi	ons Regarding Compensation	on		199 0191010			
	Ç						Yes	No
1a		opiate box(es) if the organization pr Section A, line 1a. Complete Part II						
	First-class	or charter travel		Housing allowance or residence fo	r personal use			
	Travel for	companions		Payments for business use of pers	sonal residence			
	Tax idemn	ification and gross-up payments		Health or social club dues or initia	tion fees			
	Discretion	ary spending account		Personal services (e.g., maid, chau	ffeur, chef)			
b	,	exes on Line 1a are checked, did the or provision of all of the expenses		. , ,	, , ,	1b		
		· · · ·	described	above: If No, complete fait III	to explain	10		<u> </u>
2		ation require substantiation prior to		3 1	,	2	Yes	
	directors, trust	ees, officers, including the CEO/Exe	ecutive Di	rector, regarding the items checke	d on Line 1a?.			
3	organization's	if any, of the following the filing ord CEO/Executive Director. Check all t ed organization to establish compe	hat apply	. Do not check any boxes for metho	ods			
	Compensa	tion committee	V	Written employment contract				
	✓ Independe	ent compensation consultant	V	Compensation survey or study				
	Form 990	of other organizations	V	Approval by the board or compens	ation committee			
4		r, did any person listed on Form 990 a related organization:	), Part VII	I, Section A, line 1a, with respect to	the filing			
а	Receive a seve	rance payment or change-of-contro	l paymen	t?		4a		Νo
b	Participate in,	or receive payment from, a supplem	ental non	qualified retirement plan?		4b		Νo
c	Participate in,	or receive payment from, an equity-	based co	mpensation arrangement?		4c		Νo
	If "Yes" to any	of lines 4a-c, list the persons and p	rovide th	e applicable amounts for each item	in Part III.			
	0.1. 504(.)(0)	504(-)(4) I 504(-)(20) i						
5	For persons lis	, <b>501(c)(4), and 501(c)(29) organiz</b> ted on Form 990, Part VII, Section <i>i</i> contingent on the revenues of:		•	any			
_	•	-				-		
a b		on?				5a 5b		
b		e 5a or 5b, describe in Part III.				30		
6		ted on Form 990, Part VII, Section , contingent on the net earnings of:	A, line 1a	, did the organization pay or accrue	e any			
а	The organization	on?				6a		
b		ganization?				6b		
	If "Yes," on lin	e 6a or 6b, describe in Part III.						
7		ted on Form 990, Part VII, Section Addressed in lines 5 and 6? If "Yes,"				7		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must ed  (A) Name and Title	quui		own of W-2 and/or					
(A) Name and Title		(в) вгеакас	compensation	1033-MI2C	and other	( <b>D</b> ) Nontaxable benefits	columns	<b>(F)</b> Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation	Bellettes	(B)(i)-(D)	column (B) reported as deferred on prior Form 990
1GREGORY P GOECKNER CHIEF OPERATING OFFICER	(i)	284,443	0	0	8,865	0	293,308	0
	(ii)	0	0	0	0	0	0	0
								Form 990) 2019

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference

Explanation

Page 3

Schedule J (Form 990) 2019

# Return Reference Explanation PART I, LINE 3 THE COO OF THE ASSOCIATION HAS AN EMPLOYMENT CONTRACT AND HIS COMPENSATION IS BEING APPROVED ANNUALLY BY THE

FINANCIAL COMMITTEE AND BOARD OF DIRECTORS.

Schedule J (Form 990) 2019



### SCHEDULE O (Form 990 or 990-EZ)

# Si

## 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.

► Attach to Form 990 or 990-EZ. ► Go to <u>www.irs.gov/Form990</u> for the latest information. 201

95-6191816

Open to Public Inspection Employer identification number

OMB No. 1545-0047

HOLLYWOOD FOREIGN PRESS ASSOCIATION

Department of the Treasury

Name of the organization

Internal Revenue Service

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	EXECUTIVE SECRETARY (RUBEN NEPALES) AND TREASURER (JANET NEPALES) ARE MARRIED.
FORM 990, PART VI, SECTION A, LINE 6	THE ORGANIZATION HAS 87 ACTIVE, INDEPENDENT VOTING MEMBERS WHO ARE WRITERS OR PHOTOGRAPHERS IN THE ENTERTAINMENT INDUSTRY. THE ORGANIZATION ALSO HAS FIVE LIFETIME MEMBERS; THREE MEMBERS WITH VOTING RIGHTS AND TWO MEMBERS WITHOUT VOTING RIGHTS. IN ADDITION, THE ASSOCIATION HAS AFFILIATE MEMBERS WHO ARE NOT ACTIVE AND HAVE NO VOTING RIGHTS.
FORM 990, PART VI, SECTION A, LINE 7A	THE ORGANIZATION'S 87 ACTIVE, INDEPENDENT VOTING MEMBERS AND THREE LIFE TIME MEMBERS WITH VOTING RIGHTS ELECT, ANNUALLY, THE OFFICERS OF THE ASSOCIATION (PRESIDENT, VICE PRESIDENT, TREASURER, AND EXECUTIVE SECRETARY), AND FIVE ADDITIONAL MEMBERS TO THE BOARD OF DIRECTORS.
FORM 990, PART VI, SECTION A, LINE 7B	ALL DECISIONS OF THE BOARD OF DIRECTORS, SUCH AS APPROVAL OF THE BOARD'S ELECTION OR REMOVAL OF MEMBERS OF THE BOARD, OR MEMBERS OF THE ASSOCIATION, MUST BE APPROVED BY A MAJORITY OF THE VOTING MEMBERS, UNLESS THE BYLAWS CALL FOR 2/3 OF THE VOTING MEMBERS. FINANCIAL EXPENDITURES IN EXCESS OF \$5,000 MUST BE APPROVED BY THE MAJORITY OF THE VOTING MEMBERS AS WELL.
FORM 990, PART VI, SECTION B, LINE 11B	FORM 990 IS SUBMITTED TO THE ORGANIZATION'S AUDITORS AND CHIEF OPERATING OFFICER ("COO") FOR REVIEW. ONCE APPROVED, THE RETURN IS SIGNED BY THE PRESIDENT.
FORM 990, PART VI, SECTION B, LINE 12C	THE BOARD OF DIRECTORS REVIEWS, AT THEIR REGULAR SCHEDULED MEETINGS, COMPLIANCE WITH THE ASSOCIATION'S CONFLICT OF INTEREST POLICY.
FORM 990, PART VI, SECTION B, LINE 15	THE PROCESS FOR DETERMINING COMPENSATION LEVELS GOES THROUGH COMPARABILITY DATA WITH SIMILAR TAX EXEMPT ENTERTAINMENT RELATED ORGANIZATIONS. COMPENSATION CHANGES ARE RECOMMENDED BY THE ASSOCIATION'S COMPENSATION CONSULTANT MARK LIPIS AND APPROVED BY THE BOARD OF DIRECTORS. COMPENSATION OF THE BOARD AND ELECTED OFFICERS ARE SUBMITTED TO THE FULL MEMBERSHIP FOR APPROVAL.
FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS AND AUDITED FINANCIAL STATEMENTS AVAILABLE UPON REQUEST. ON APRIL 15, 2020, THE ORGANIZATION'S GENERAL MEMBERSHIP APPROVED AND ADOPTED THE NEW CONFLICT OF INTEREST POLICY.
FORM 990, PART XII, LINE 1	THE ORGANIZATION'S FINANCIAL STATEMENTS AS WELL AS FORM 990 HAVE BEEN PREPARED ON THE MODIFIED CASH BASIS OF ACCOUNTING SINCE INCEPTION.
FORM 990, PART XII, LINE 2(C)	THE ORGANIZATION'S FINANCIAL COMMITTEE CONFIRMS, ANNUALLY, AN INDEPENDENT ACCOUNTANT TO AUDIT THE FINANCIAL STATEMENTS. THE COMPLETED FINANCIAL STATEMENTS ARE REVIEWED BY THE FINANCIAL COMMITTEE, AND THEN SUBMITTED FOR REVIEW TO THE BOARD OF DIRECTORS AS WELL AS THE FULL MEMBERSHIP. FORM 990, PART XII, LINE 2(B): WE CONTINUE TO ISSUE THE FINANCIAL STATEMENTS OF THE HOLLYWOOD FOREIGN PRESS ASSOCIATIONS AND THE HOLLYWOOD FOREIGN PRESS ASSOCIATION CHARITABLE TRUST ON CONSOLIDATED BASIS.
For Paperwork Redu	ction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat. No. 51056K Schedule O (Form 990 or 990-EZ) 2019

### SCHEDULE R (Form 990)

### **Related Organizations and Unrelated Partnerships**

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

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

2019
Open to Public Inspection

**Employer identification number** 

95-6191816

Department of the Treasury
Internal Revenue Service

Name of the organization
HOLLYWOOD FOREIGN PRESS ASSOCIATION

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

(a) Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	<b>(e)</b> End-of-year assets		<b>(f)</b> Direct controlling entity		
(1) 656 NORTH ROBERTSON LLC 656 NORTH ROBERTSON BLVD WEST HOLLYWOOD, CA 90069 84-2708459	REAL ESTATE CONSTRUCTION AND MANAGEMENT	CA	0	16,701,148	HOLLYW ASSOCI	VOOD FOREIGN PRESS ATION		
Part II Identification of Related Tax-Exempt Organization or more related tax-exempt organizations during the	ations. Complete if the o	organization ansv	wered "Yes" on I	Form 990, Part I\	/, line	34 because it had	one	
(a) Name, address, and EIN of related organization	(b)	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity star (if section 501(c))		(f) Direct controlling entity	Sec 512	
	CHARITIES TO	CA	501(C)(3)	SUPPORT ORGANIZAT	ΓΙΟΝ		Yes	
	ENTERTAINMENT RELATED ORGANIZATIONS					N/A		
For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Cat. No. 5013	5Y			Schedule R (Form 990	) 201	9

<b>(a)</b> Name, address, and EIN of related organization		<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	Disprop	h) rtionate tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man par	j) eral or naging tner?	Perce owne	<b>k)</b> enta ersh
								Yes	No		Yes	No		
			+		+									
Identification of Related Orga 34 because it had one or more re (a) Name, address, and EIN of related organization	anizations Taxable a elated organizations tre (b) Primary activity	eated as a c	orporat (c) Legal omicile	on or trus	t during the ta  (d) ect controlling Type entity (C co	(e) e of entity orp, S corp,	(f) Share of total income	Share	(g) e of end- year	-of- Perce	990, I	s	(i ection 13) co	) 512 ntro
34 because it had one or more re  (a)  Name, address, and EIN of	elated organizations tre	eated as a c	orporat (c) <sub>Legal</sub>	on or trus	t during the ta  (d) ect controlling Type entity (C co	(e) e of entity	<b>(f)</b> Share of total	Share	(g) e of end	-of- Perce	( <b>h)</b> entage	S (I	(i ection	) 512 ntro ty?
34 because it had one or more re  (a)  Name, address, and EIN of	elated organizations tre	eated as a c	orporat (c) Legal omicile or foreigr	on or trus	t during the ta  (d) ect controlling Type entity (C co	(e) e of entity orp, S corp,	<b>(f)</b> Share of total	Share	(g) e of end- year	-of- Perce	( <b>h)</b> entage	S (I	(i ection 13) cor enti	) 512 ntro ty?
34 because it had one or more re  (a)  Name, address, and EIN of	elated organizations tre	eated as a c	orporat (c) Legal omicile or foreigr	on or trus	t during the ta  (d) ect controlling Type entity (C co	(e) e of entity orp, S corp,	<b>(f)</b> Share of total	Share	(g) e of end- year	-of- Perce	( <b>h)</b> entage	S (I	(i ection 13) cor enti	) 512 ntro
34 because it had one or more re  (a)  Name, address, and EIN of	elated organizations tre	eated as a c	orporat (c) Legal omicile or foreigr	on or trus	t during the ta  (d) ect controlling Type entity (C co	(e) e of entity orp, S corp,	<b>(f)</b> Share of total	Share	(g) e of end- year	-of- Perce	( <b>h)</b> entage	S (I	(i ection 13) cor enti	) 512 ntro ty?
34 because it had one or more re  (a)  Name, address, and EIN of	elated organizations tre	eated as a c	orporat (c) Legal omicile or foreigr	on or trus	t during the ta  (d) ect controlling Type entity (C co	(e) e of entity orp, S corp,	<b>(f)</b> Share of total	Share	(g) e of end- year	-of- Perce	( <b>h)</b> entage	S (I	(i ection 13) cor enti	) 512 ntro ty?
34 because it had one or more re  (a)  Name, address, and EIN of	elated organizations tre	eated as a c	orporat (c) Legal omicile or foreigr	on or trus	t during the ta  (d) ect controlling Type entity (C co	(e) e of entity orp, S corp,	<b>(f)</b> Share of total	Share	(g) e of end- year	-of- Perce	( <b>h)</b> entage	S (I	(i ection 13) cor enti	) 512 ntro ty?

Schedule R (Form 990) 2019						
Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.						
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No			
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?						
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		No			
<b>b</b> Gift, grant, or capital contribution to related organization(s)						
C Gift, grant, or capital contribution from related organization(s)	<b>1</b> c		No			
<b>d</b> Loans or loan guarantees to or for related organization(s)	1d		No			
e Loans or loan guarantees by related organization(s)	1e		No			
f Dividends from related organization(s)	1f		No			
<b>g</b> Sale of assets to related organization(s) · · · · · · · · · · · · · · · · · · ·	<b>1</b> g		No			
<b>h</b> Purchase of assets from related organization(s)	1h		No			
i Exchange of assets with related organization(s)	<b>1</b> i		No			
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No			
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No			
Performance of services or membership or fundraising solicitations for related organization(s)	11		No			
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No			
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	<b>1</b> n		No			
• Sharing of paid employees with related organization(s)	10		No			
<b>p</b> Reimbursement paid to related organization(s) for expenses	<b>1</b> p		No			

q	Reimbursement paid by related organization(s) for expenses				1q	No
r	Other transfer of cash or property to related organization(s)				1r	No
s	Other transfer of cash or property from related organization(s)				1s	No
2	If the answer to any of the above is "Yes," see the instructions for information on who mus	st complete this line, including	covered relationship	s and transaction threshol	ds.	
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining	amount inv	olved
<b>(1)</b> HC	ILLYWOOD FOREIGN PRESS ASSOCIATION CHARITABLE TRUST	В	1,900,000	ACTUAL COSTS		
		•	•	•		

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

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

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.													
(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from	o	(e) re all partners section 501(c)(3) rganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionat allocations?	te	(i) Code V-UBI amount in box 20 of Schedule K-1	(j) General o managin partner?	r	<b>(k)</b> Percentage ownership
		200.707)	tax under sections 512- 514)		No			Yes	No	(Form 1065)	Yes	No	

Schedule R (Form 990) 2019	Page <b>5</b>									
Part VII Supplemental Information										
Provide additional info	ormation for responses to questions on Schedule R. (see instructions).									
Return Reference	Explanation									
		Schedule R (Form 990) 2019								
Additional Data		Return to Form								
	Software ID:									
	Software Version:									