Form **990**

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

OMB No. 1545-0047 2020

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Α	For t	he 2020 calen	dar year, or tax year begin	ning 4/01	, 2020,	and endin	g = 3/	31	,	, 20 2021
В	Check	if applicable:	C					D Employ	er identi	ification number
	Па	ddress change	ASSOCIATION OF S	ERVICE AND COM	MPUTER			288	1363	
	\vdash	ame change	DEALERS INTERNAT					E Telepho	one numb	ber
		37.0	131 NW 1ST AVE					156	11 2	66-0016
	Hir	itial return	DELRAY BEACH, FL	33444				(30	1) 2	66-9016
	Fi	nal return/terminated								
	A	mended return						G Gross r	eceipts	\$ 365,764.
	Па	pplication pending	F Name and address of principa	officer:			H(a) Is this	a group retur	n for sub	oordinates? Yes X No
			SAME AS C ABOVE				H(b) Are all If "No,"	subordinates	included	d? Yes No
_	Tay	exempt status:	501(c)(3) X 501(c) (6) ◄ (insert no.)	4947(a)(1) or	527	IT INO,	attach a list	. See ins	structions
÷				5 / (moore no.)	1017(4)(17 6)	1 02,	U/-> Croup	exemption n	umbor Þ	
J			W.ASCDI.COM		1.					
K		n of organization:	Corporation Trust X	Association Other	LY	ear of format	ion: 198.	T IM:	State of le	egal domicile: FL
Pa	art I	Summar	У							
	1	Briefly descri	be the organization's missi	on or most significant	activities:REP	RESENT.	ATION	OF BUS	INES	SES ENGAGED
40		IN SELLI	SH PRO	MITON	NG HIGH					
2		ETHICAL	STANDARDS, PRESE	NT INDUSTRY VI	EWS TO MAI	NUFACTU	JRERS A	AND PRO	OVIDE	E A FORUM FOR
133			G MEMBERS ON INDI							
Ver	2	Check this bo	ox ► lif the organization	n discontinued its ope	rations or dispo	sed of mo	ore than 2	5% of its	net as	sets.
e	3		oting members of the gover	rning body (Part VI, lir	ne 1a)				3	17
ంభ	4		dependent voting members						4	17
63	5		of individuals employed in						5	0
Z	6		of volunteers (estimate if						6	30
Activities & Governance	72		ed business revenue from I						7a	0.
d.			business taxable income						7b	0.
	l n	ivet unrelated	a business taxable income	nomi om 330-1, i ai	t i, into i i			rior Year	10	Current Year
		0	and another (Deat VIII) line	16)				Hor rear		
0	8		and grants (Part VIII, line					116 6	01	900.
Revenue	9		vice revenue (Part VIII, line					446,0		362,539.
eVe	10		ncome (Part VIII, column (A					2,6	25.	2,325.
ď	11		e (Part VIII, column (A), lir							
	12		e - add lines 8 through 11					448,6	526.	365,764.
	13	Grants and si	imilar amounts paid (Part I	X, column (A), lines 1	-3)					
	14	Benefits paid	to or for members (Part I)	K, column (A), line 4)						
	15		er compensation, employee		119,7	700	119,700.			
60						110/	00.	2237.001		
J.S	16a		fundraising fees (Part IX, o							
Expenses	b	Total fundrais	sing expenses (Part IX, col	umn (D), line 25) ►						
Ш	17	Other expens	ses (Part IX, column (A), lin	nes 11a-11d, 11f-24e)			302,700.			244,648.
	18		es. Add lines 13-17 (must					422,4		364,348.
			expenses. Subtract line 1					26,2		1,416.
	19	Revenue less	expenses. Subtract line 1	b from fine 12						End of Year
sets or								ng of Currer		
sot	20	Total assets	(Part X, line 16)					336,3		439,881.
A B	21	Total liabilitie	es (Part X, line 26)					333,5	99.	422,693.
Net Ase Fund Be	22	Net assets or	fund balances. Subtract li	ne 21 from line 20				2,7	36.	17,188.
	art II	Signatur	e Block							
				un including accompanying	schodules and statem	nents and to	the hest of m	v knowledne	and heli	ef it is true correct and
com	er pena plete. D	eclaration of prepa	eclare that I have examined this returner (other than officer) is based on	all information of which preparation	arer has any knowled	lge.	are best of in	y knowledge	and bon	01, 16 10 000, 0011001, 0110
		16					T			
		Signatu	ire of officer				Da	te		
Sig	gn									
He	re		EPH MARION				PRESI	LDENT		
		Type or	print name and title							
		Print/Type p	preparer's name	Preparer's signature		Date		Check	if	PTIN
Pa	id	SCOTT	HAGAMAN, CPA	SCOTT HAGAMAN	I. CPA			self-employ	ed	P00184266
D	nu onar					VGET.				
He	epar	1 1			OIMITO & EI	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Firm's EIN	> 20	
US	e UI	Firm's addre						Total School School St.		2) 000 0500
			FAIRFIELD, N					Phone no.	(973	
Ma	v tho	IDS discuse th	is return with the preparer	shown above? See in	structions					. X Yes No

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Par	Statement of Program Service Accomplishments			<u></u>
	Check if Schedule O contains a response or note to any line in this Part III			X
1	Briefly describe the organization's mission:			
	REPRESENTATION OF BUSINESSES ENGAGED IN SELLING AND SERVICING P			
	EQUIPMENT THROUGH PROMOTING HIGH ETHICAL STANDARDS, PRESENT IND			
	MANUFACTURERS AND PROVIDE A FORUM FOR INFORMING MEMBERS ON INDU	STRY RELATEL	MATTER	<u>s. </u>
2	Did the organization undertake any significant program services during the year which were not listed on the	prior		
-	Form 990 or 990-EZ?	П	Yes X	No
	If "Yes," describe these new services on Schedule O.	Ц		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	services?	Yes X	No
	If "Yes," describe these changes on Schedule O.	ل ٠٠٠٠٠٠	ي دد	
4	Describe the organization's program service accomplishments for each of its three largest program se Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocation and revenue, if any, for each program service reported.	ervices, as measure ions to others, the f	ed by expens total expens	ses. es,
4 9	(Code:) (Expenses \$ including grants of \$)	(Revenue \$		<u> </u>
40	THE ASSOCIATION PUBLISHES AND DISTRIBUTES NUMEROUS MONTHLY NEWS	·	KEEP T	<u> </u>
	MEMBERSHIP INFORMED OF DEVELOPMENTS AND ITEMS OF GENERAL BUSINE			
	INDUSTRY.			
4 h	(Code:) (Expenses \$ including grants of \$)	(Revenue \$)
-,-	THE ASSOCIATION ORGANIZES DELEGATIONS OF EXPERIENCED INDIVIDUAL		NT THE	
	INDUSTRY AS A WHOLE IN COMMUNICATING AND NEGOTIATING ON ISSUES			
	BETWEEN BUSINESSES AND KEY INDUSTRY VENDORS.			
4 c	(Code:) (Expenses \$ including grants of \$)	(Revenue \$		
	THE ASSOCIATION PROMOTES ETHICAL BUSINESS PRACTICES WITHIN THE	INDUSTRY BY		
	PROMULGATING AND ADMINISTERING A CODE OF BUSINESS ETHICS.			
			_ 	
				
4 d	Other program services (Describe on Schedule O.) SEE SCHEDULE O			
	(Expenses \$ including grants of \$) (Revenue 5	\$)	
4e	Total program service expenses ►			
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Part IV | Checklist of Required Schedules

-			Yes	No	
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors See instructions?	2		X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4			
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5	Х		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I.	6		Х	
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		Х	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х	
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.				
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If 'Yes,' complete Schedule D, Part V	10		Х	
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.				
â	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI</i> .	11 a		Х	
ŧ	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.	11 b		Х	
(: 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	11 c		Х	
(Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х	
6	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		X	
128	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		Х	
ŀ	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional.	12 b		Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X	
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X	
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV.	14b		Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV.	15		Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV.	16		Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (Å), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I See instructions.	17		Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18		Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		Х	
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х	
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21		Х	
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Part IV Checklist of Required Schedules (continue	Part IV	Checklist of	Required	Schedules	(continued
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			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		Х
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a.	24a		Х
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		
	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If</i> 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
i	a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part IV	28a		Х
	A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV	28b		X
	c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If Yes,' complete Schedule L, Part IV.	28c	х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1.	34	Х	
35 8	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
5000	T - 1		Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1.0	Х	
DAA	(gambling) winnings to prize winners?	1 c	990 (2020)

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

			Yes	No
2 8	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
	of at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 :	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	of Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation on Schedule O	3 b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			v
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5 :	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
	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?	6 a		X
Ŀ	olf 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
г	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		
ŀ	of If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		
	If 'Yes,' indicate the number of Forms 8282 filed during the year	70		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7 h		
8	Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	/11		
O	organization have excess business holdings at any time during the year?	8		
0	Sponsoring organizations maintaining donor advised funds.			
9	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?	9 b		
		3.5		
	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
Ŀ	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O	14b		
	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		X
	If 'Yes,' see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		_X
	If 'Yes,' complete Form 4720, Schedule O.			
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Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

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

Se	ection A. Governing Body and Management				
			Yes	No	
1	1a Enter the number of voting members of the governing body at the end of the tax year 1a 17 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
	b Enter the number of voting members included on line 1a, above, who are independent 1b 17				
	2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other				
-	officer, director, trustee, or key employee?	2		X	
	3 Did the organization delegate control over management duties customarily performed by or under the direct supervision				
•	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3		X	
4	4 Did the organization make any significant changes to its governing documents				
	since the prior Form 990 was filed?	4		X	
į	5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5	37	X	
	5 Did the organization have members or stockholders? SEE. SCHEDULE. O	6	X		
7	7 a 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? . SEE .SCHEDULE. O.	7 a	Х		
	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b	Х		
8	B Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
	a The governing body?	8 a	X		
	b Each committee with authority to act on behalf of the governing body?	8 b	Λ	_	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses on Schedule O	9	0	X	
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Re	venu			
		10 a	Yes	No	
10	Da Did the organization have local chapters, branches, or affiliates?	10 a		Λ	
	operations are consistent with the organization's exempt purposes?	10 b			
11	1 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	X		
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O				
12	2a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	X		
	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	401	17		
	to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in	12 b	X		
	Schedule O how this was done SEE, SCHEDULE, O	12 c	Х		
13	3 Did the organization have a written whistleblower policy?	13	X		
	4 Did the organization have a written document retention and destruction policy?	14	X	F1207 B30-2111	
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?				
	a The organization's CEO, Executive Director, or top management official. SEE. SCHEDULE .O	15 a	X		
	b Other officers or key employees of the organization.	15 b	en and an	X	
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).				
16	6a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		X	
	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?	16 b			
Se	ection C. Disclosure				
17	7 List the states with which a copy of this Form 990 is required to be filed NONE				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 5 available for public inspection. Indicate how you made these available. Check all that apply.)1(c)(3)s on	ıly)	
Own website Another's website X Upon request Other (explain on Schedule O)					
	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available the public during the tax year. SEE SCHEDULE O	ble to			
20	State the name, address, and telephone number of the person who possesses the organization's books and records ►				
	JOE MARION 131 NW 1ST AVE. DELRAY BEACH FL 33444 (561) 266-9016				



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

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

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.										
				(C)						
(A) Name and title	(B) Average hours	ls.	s both dir	n an c	trust/			Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	per week (list any hours for related organiza- tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) JOSEPH MARION VIA MGMT COMPANY PRESIDENT & CEO	30 _			х				119,700.	0.	0.
(2) SHERRI SHEERR	_3									
SECRETARY	0	Х		Х				0.	0.	0.
(3) TODD BONE	3									
CHAIRMAN	0	X		X				0.	0.	0.
(4) ANDREAS LUND FIBIGER	3									
VICE PRESIDENT	0	X		X				0.	0.	0.
(5) DANIEL VILLAVECES	3									0
DIRECTOR	0	X	_	_	_	\vdash	_	0.	0.	0.
(6) THOMAS WELTIN	3	v		х				0.	0.	0.
CHAIRMAN EMERIT	3	X	-	Λ	_	\vdash	-	0.	0.	0.
	$-\frac{3}{0}$	Х		Х				0.	0.	0.
(8) ANUAR GARCIA	3	11				\vdash		0.	0.	
DIRECTOR	0	Х						0.	0.	0.
(9) STEFFEN MILLER	3									
DIRECTOR	0	Х						0.	0.	0.
(10) FRANK KOBUSZEWSKI	3									
DIRECTOR	0	X						0.	0.	0.
(11) JERRY ROBERTS	3									
CHAIRMAN EMERIT	0	X		X				0.	0.	0.
(12) SEAN PRICE	3									
DIRECTOR	0	X						0.	0.	0.
(13) NEIL VILL	3									
PAST CHAIRMAN	0	X		X				0.	0.	0.
(14) ANDRZEJ KRUPA	3	.,							_	0
DIRECTOR	0	X						0.	0.	0.

E CALLES TO THE TRACE OF THE TR ORKEO OR EVAN COMPLY ALON STEWN HAS TO ALEXE SASSOCI CAT (NYEA BOLDE) 0187.574 OLET JOY 6) DVIII O JOY VARLE ALOE BELGVOLLS (6) VIII LET a rodd bont charfyrau Carlos Marian Marian Carlos Marian Region (1988) Principal. 1998 : 1986 (46) The state of the first time and the section of the क्षित्र के बातकर्तावर किर किए कार्यकर भी सम्बद्धी के विस्त क्षित्र क्षित्र कर्मा किर LE List with the consistence of the constraint of the constraint of the interest of the large constraint of the constrai A fill the contribution but mental equipment of the contribution o

ு அன்றுவே கின முடம் ஆய்யகமையு சமையமையு வறுரியுக மாகம், வள்ளும் கீஷ் (மன்மை அமையுமையும் கூடும் நடித்த பெர் ம

Describe demande de contrar en constituent de la constituent de la constituent de la constituent de constituent

CONGRETARION FOR EACH REPORT (OF (EVILLE) (E) IS NO CONDECTION OF BOX A (MI) IS NO CONDECTION OF THE CONTRACT OF CONTRACT PROPERTY MARKET FOR THE STATE OF THE CONTRACT OF TH

Anna Sed (2020) - ASSOCIA, TOTLOB (SERVICE, AND COMPLIED) - COMPRISED (SERVICE) - Compensation of Compensation

Challege Senal Sena Price Yunioria

Tems with



(A) Name and title	Name and title hours box, unless person is both an Repo officer and a director/trustee) compens.		(D) Reportable compensation from	(E) Reportable compensation from	Estima	(F) ted amount					
	week	or director	-			employee		the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	comper the or and	f other isation from ganization i related nizations
(15) KAREN MCGAUGHEY VICE PRESIDENT	3	v		Х				0.	0.		0
(16) BRETT ROGERS	3	X		Λ				0.	0.		0.
DIRECTOR	0	X						0.	0.		0.
(17) AREN GRIFFITHS	3										
DIRECTOR	0	X						0.	0.		0.
(18) CARSTEN MARCELL	3								•		•
TREASURER	0	X		X	_	_	-	0.	0.		0.
(19)		-									
(20)											
(21)											
(22)											
(23)											
(24)											
(25)											
1 b Subtotal							>	119,700.	0.		0.
c Total from continuation sheets to Part VII, Section							A	0.	0.		0.
d Total (add lines 1b and 1c).							-	119,700.	0.	enaction	0.
2 Total number of individuals (including but not limited from the organization ► 1	to those I	isted	abov	ve) v	vno	recei	vea	more than \$100,00	o of reportable comp	ensation	
from the organization				_							Yes No
3 Did the organization list any former officer, direc	tor truste	o ko	W 01	mnle	21/06	or	hiat	nest compensated	employee		100 110
on line 1a? If 'Yes,' complete Schedule J for suc	h individu	al						····	····	. 3	X
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate	reportable	le co	mpe	nsa	tion	and	oth	er compensation	from		
the organization and related organizations greate such individual	er than \$1	50,00	00?	If 'Y	es,	con	nple	te Schedule J for		. 4	Х
5 Did any person listed on line 1a receive or accrufor services rendered to the organization? If 'Yes	e compen	satio	n fro	om :	any <i>J fo</i>	unre	late	ed organization or erson	individual	. 5	X
Section B. Independent Contractors											
1 Complete this table for your five highest compen compensation from the organization. Report compen	sated inde	epen	dent	dar	ntra	ctors endi	tha	it received more the	nan \$100,000 of ganization's tax vear	L.	
(A) Name and business add		110 0	41011	uai j	, our	01101		(B) Description of		(C Comper) nsation
MARION ASSOCIATES 131 NW 1ST AVE DELRAY BE	ACH, FL	334	44			-		ADMIN OFFICE	& SVCS	1.	44,000.
THE PARTY AND											
2 Total number of independent contractors (including b	uit not limi	ted to	the	so li	ister	laho	ve)	who received more	than		
\$100,000 of compensation from the organization		iou i(, uio	SC I	13156		10)	mio received more	u di		
The Colors of Componsation from the Organization					7/00		-		and the same of th	Form (290 (2020)

Form 990 (2020) ASSOCIATION OF SERVICE AND COMPUTER Part VIII Statement of Revenue

		Check if Schedule O contains	a resp	onse or note to any	line in this Part VI			<u> </u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512-514
ts	1a	Federated campaigns	1 a					
ra m	b	Membership dues	1 b					
S, G	С	Fundraising events	1 c					
Contributions, Gifts, Grants and Other Similar Amounts	d	Related organizations	1 d					
S III	е	Government grants (contributions)	1 e	900.				
P S	f	All other contributions, gifts, grants, and	7.6					
but	,	similar amounts not included above Noncash contributions included in	1f					
E O	9	lines 1a-1f	1 g					
a S	h	Total. Add lines 1a-1f			900.			
				Business Code				
Ven	2a	MEMBERSHIP DUES & ASSESSI	MENTS		297,393.	297,393.		
Re	b	EXHIBIT AND ROYALTY FEES			57,061.			57,061.
jće.	С	CONVENTION FEES			8,028.	8,028.		
Ser	d	UPS_PROGRAM			57.	57.		
E	е							
Program Service Revenue		All other program service reven						
2	_	Total. Add lines 2a-2f			362,539.			
	3	Investment income (including divident other similar amounts)	lends, in	iterest, and	0 005	0.205		
		Income from investment of tax-			2,325.	2,325.		
	4			CONTRACTOR AND CONTRACTOR CONTRACTOR				-
	5	Royalties	Real	(ii) Personal				
		Gross rents 6a	(cai	(ii) i eisonai				
				-				
		Less: rental expenses 6b Rental income or (loss) 6c						
	0.000	Net rental income or (loss)						
		(i) Sec	urities	(ii) Other				
	7 a	Gross amount from sales of assets		(ii) cuidi				
		other than inventory 7a						
	b	Less: cost or other basis and sales expenses 7b						
	_	Gain or (loss) 7c						
		Net gain or (loss)		b				
				1				
enne	8 a	Gross income from fundraising events (not including \$						
Je l		of contributions reported on line 1c).						
Re		See Part IV, line 18	88					
9	h	Less: direct expenses	81					
Other Rev		Net income or (loss) from fundr	1000	15				
Ų		Gross income from gaming activities.						
	9 a	See Part IV, line 19	9 a					
	b	Less: direct expenses	91					
	С	Net income or (loss) from gamin	ng activi	ities				
		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -						
	iva	Gross sales of inventory, less returns and allowances	10a					
	b	Less: cost of goods sold	101					
	С	Net income or (loss) from sales	of inve	ntory ▶				
Ω				Business Code				
Miscellaneous Revenue	11 a							
and and	b							
scellaneo Revenue	С							
ž x	_	All other revenue						
		Total. Add lines 11a-11d						
	12	Total revenue. See instructions.			365,764.	307,803.	0.	57,061.



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

	Check if Schedule O contains a response or note to any line in this Part IX									
Do i	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.									
2	Grants and other assistance to domestic individuals. See Part IV, line 22									
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16									
4	Benefits paid to or for members									
5	trustees, and key employees	119,700.								
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.								
7	Other salaries and wages									
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)									
9	Other employee benefits									
10	Payroll taxes									
11	Fees for services (nonemployees):									
а	Management	144,000.								
b	Legal	30,379.								
C	Accounting	3,000.								
d	Lobbying									
е	Professional fundraising services. See Part IV, line 17									
	Investment management fees	651.								
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.)	25,463.								
12	Advertising and promotion	5,800.								
13	Office expenses	1,442.								
14	Information technology	10,142.								
15	Royalties									
16	Occupancy									
17	Travel									
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.									
19	Conferences, conventions, and meetings	8,775.								
20	Interest									
21	Payments to affiliates									
22	Depreciation, depletion, and amortization									
23	Insurance	2,450.								
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)									
а	BANK AND CREDIT CARD FEES	7,425.								
	DUES & SUBSCRIPTIONS	7,000.								
	BOARD MEETINGS	1,466.								
	MISC TAXES	122.								
е	All other expenses	-3,467.								
25	Total functional expenses. Add lines 1 through 24e	364,348.								
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)		-		E					

	4117	Check if Schedule O contains a response or note to any line in this Part X			П
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	135,155.	1	267,428.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	143,466.	4	98,601.
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under	是是以外的各种的。		
		section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
sts	8	Inventories for sale or use		8	
Assets	9	Prepaid expenses and deferred charges.		9	1,427.
A		Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation		10 c	
	11	Investments – publicly traded securities	57,714.	11	72,425.
	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11.		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33).	336,335.	16	439,881.
	17	Accounts payable and accrued expenses	22,039.	17	23,651.
	18	Grants payable		18	
	19	Deferred revenue	311,560.	19	299,042.
	20	Tax-exempt bond liabilities		20	
0	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	100,000.
	24	Unsecured notes and loans payable to unrelated third parties		24	100,000.
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.		25	
	26	Total liabilities. Add lines 17 through 25.	333,599.	26	422,693.
Ses		Organizations that follow FASB ASC 958, check here ► X			
		and complete lines 27, 28, 32, and 33.			
alai	27	Net assets without donor restrictions	2,736.	27	17,188.
ä	28	Net assets with donor restrictions		28	
Net Assets or Fund Balan		Organizations that do not follow FASB ASC 958, check here ▶ and complete lines 29 through 33.			
Ö	29	Capital stock or trust principal, or current funds		29	
ste	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
886	31	Retained earnings, endowment, accumulated income, or other funds		31	
E.A	32	Total net assets or fund balances	2,736.	32	17,188.
₹	33	Total liabilities and net assets/fund balances	336,335.	33	439,881.

	1990 (2020) ASSOCIATION OF SERVICE AND COMPUTER	HIGH		Pa	ge 12
Pai	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3	65,7	64.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3	64,3	48.
3	Revenue less expenses. Subtract line 2 from line 1	3		1,4	16.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		2,7	36.
5	Net unrealized gains (losses) on investments	5		13,0	36.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O).	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	33	17,1	.88
Pai	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII.				🔲
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2 8	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X

)	res No	,
1	Accounting method used to prepare the Form 990:			88.28
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2 8	a Were the organization's financial statements compiled or reviewed by an independent accountant?	2 a	X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis			
ŀ	b Were the organization's financial statements audited by an independent accountant?	2 b	X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis			
C	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2 c		
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.			
3 8	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3 a	Х	
t	o If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3 b		_
BAA	TEEA0112L 10/19/20	Form 9	990 (2020	0)

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It will be supported to the support of the sup the subscribble part of the part

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SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047 2020

Department of the Treasury Internal Revenue Service

(6)

► 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.

Open to Public Inspection

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 organization Employer identification number ASSOCIATION OF SERVICE AND COMPUTER DEALERS INTERNATIONAL Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 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)..... 3 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 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? No No b If 'Yes,' describe in Part IV. 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. ▶ \$ 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, X No Did the filing organization file Form 1120-POL for this year?.... 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 (c) EIN (d) Amount paid from (e) Amount of political (a) Name contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-. filing organization's funds. If none, enter-0-. (1)(2)(3)(4)(5)

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

Schedule C (Form 990 or 990-EZ) 2020

Control Control	The second	
SECTION AND DESCRIPTION OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TRANSPORT OF THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TWI		100

Part II-A Complete if section 501(on is exempt under se	ction 501(c)(3) and	l filed Form 5768 (el	ection under
A Check ► ☐ if the filin	g organization befor	ngs to an affiliated group (and	list in Part IV each affilia	ated group member's name	,
address,	EIN, expenses, ar	nd share of excess lobbying	expenditures).		
B Check ► if the filir	ng organization che	ecked box A and 'limited co	ntrol' provisions apply.		
(The term	Limits on Lobb 'expenditures' me	ying Expenditures ans amounts paid or incur	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	ures to influence p	ublic opinion (grassroots lob	obying)		
b Total lobbying expenditu	ures to influence a	legislative body (direct lobb	ying)		
		and 1b)			
e Total exempt purpose e	xpenditures (add li	nes 1c and 1d)			
f Lobbying nontaxable and both columns	nount. Enter the ar	mount from the following tal	ole in		
If the amount on line 1e, cold	umn (a) or (b) is:	The lobbying nontaxable	amount is:		
Not over \$500,000		20% of the amount on line 1e.			
Over \$500,000 but not over \$1,		\$100,000 plus 15% of the excess			
Over \$1,000,000 but not over \$		\$175,000 plus 10% of the excess			
Over \$1,500,000 but not over \$	17,000,000	\$225,000 plus 5% of the excess of	over \$1,500,000.		
Over \$17,000,000	1 (1 05%	\$1,000,000.			
		of line 1f)ss, enter -0-			
		s, enter -0s, enter -0			
		24			
j If there is an amount othe section 4911 tax for this	r than zero on eithe year?	r line 1h or line 1i, did the org	anization file Form 4/20	reporting	Yes No
(Som	e organizations th columns be	4-Year Averaging Period L at made a section 501(h) el elow. See the separate inst	ection do not have to d	complete all of the five rough 2f.)	
	Lob	bying Expenditures During	4-Year Averaging Peri	od	
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2 a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures	11				
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					
BAA				Schedule C (Form	990 or 990-EZ) 2020



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

	(election under section 301(17)).		, 1		la)	
-or	each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description	(a	1)	-	b)	
	the lobbying activity.	Yes	No	Am	ount	
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
	a Volunteers?					
	b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements?					
	d Mailings to members, legislators, or the public?					
	e Publications, or published or broadcast statements?					
	f Grants to other organizations for lobbying purposes?					
	g Direct contact with legislators, their staffs, government officials, or a legislative body?					
	h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
	i Other activities?					
	j Total. Add lines 1c through 1i					
2	a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
	b If 'Yes,' enter the amount of any tax incurred under section 4912					
	c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912					
	d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Pa	art III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5)	or or			
	section 501(c)(6).	1 20020 200	:			
					Yes	No
1						X
2					X	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the p	rior ye	ear?	3		_X_
Pa	(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) Fanswered 'Yes.'	Part I	II-A,	ection 5 ine 3, is	01(c)	
1	Dues, assessments and similar amounts from members]	1			
	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
	a Current year		2 a			
	b Carryover from last year	[2 b			
	c Total		2 c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	[3			
4	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political					
	expenditure next year?		4			0.
5	Taxable amount of lobbying and political expenditures (See instructions)	[5			0.
Pa	art IV 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.

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

(10)

Name of the organization ASSOCIATION OF SERVICE AND COMPUTER DEALERS INTERNATIONAL

Employer identification number

Part I Excess B	Benefit Trans	actions (sec	ction 5	01(c)(3	3), sec	ction 501(c)(4), and s	section	501	(c)(2	9) or	gani	zatio	าร		
only). Con	nplete if the org			es' on F			ine 25a or 25t	o, or For	rm 99	0-EZ,	Part \	/, line		rected?		
1 (a) Name of disqu	ualified person	(b) Relatio		ganization	аппес рег	son and	(c) D	escription	of trans	saction			Yes	No		
(1)													103	-110		
(2)																
(3)		1														
(4)																
(5)																
(6)																
2 Enter the amount section 4958 3 Enter the amount	of tax, if any, o	n line 2, above	, reimb	ursed by		. .										
Complete if	the organization reported an am (b) Relationship with organization	answered 'Yes nount on Form 9 (c) Purpose of	on For 190, Par	rm 990-E	5, 6, or	V, line 38a (22. e) Original cipal amount	or Form 990, F			; or if	(h) Ap	oproved oard or	(i) W	ritten ment?		
	with organization	loan	organ	ization?	Print	cipai amount					comn	nittee?				
(1)	-		То	From					Yes	No	Yes	No	Yes	No		
(1)	-		-	-	-				-			-				
(2)			-						-	-		-				
(4)			+	-			+		-			-				
(5)			+	 								_				
(6)	-		+	-	-		1		-			-				
(7)	-		+	-					\vdash			 				
(8)			+													
(9)			 													
(10)																
Total						▶\$										
Part III Grants or	Assistance the organization	Benefiting	Intere	sted Pe	ersons	5.										
(a) Name of inter	ested person	(b) Relations person a	ship between and the on	en interest ganization	ed	(c) Amount	(c) Amount of assistance (d) Ty			Type of assistance (e) Purpos				se of assistance		
(1)																
(2)																
(3)																
(4)																
(5)																
(6)																
(7)																
(8)				Market Market												
(9)																

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

Schedule L (Form 990 or 990-EZ) 2020



Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz rever	ring of ration's lues?
	İ			Yes	No
(1) NCI, LLC	COMMON OFFICER	57,061.	EXHIBIT/ROYALTINCOME		X
(2) MARION ASSOCIATES	COMMON OFFICER	144,000.	ADMIN SERVICE FEE PD		X
(3)					<u> </u>
(4)					<u> </u>
(5)					
(6)					
(7)				<u> </u>	
(8)					<u> </u>
(9)					
(10)					

Part V Supplemental Information.

Provide additional information for responses to questions on Schedule L (see instructions).

SUPPLEMENTAL INFORMATION

ADMINISTRATIVE OFFICE AND PERSONEL FEES OF FOR THE YEAR ENDED MARCH 31, 2021 WERE PAID TO A MANAGEMENT COMPANY CONTROLLED BY THE ASSOCIATION'S PRESIDENT.

UNDER AN ENDORSEMENT, LICENSING AND EXHIBIT AGREEMENT A COMPANY CONTROLLED BY THE ASSOCIATION'S PRESIDENT PAYS THE ASSOCIATION DOF ITS SERVICE COLLECTIONS FOR THE RIGHT TO USE THE ASSOCIATION'S NAME AND MARKS AND FOR EXIBITING AT ASSOCIATION EVENTS.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

ASSOCIATION OF SERVICE AND COMPUTER DEALERS INTERNATIONAL

Employer identification number

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION

THE ASSOCIATION SPONSORED APPROXIMATELY TEN VIRTUAL MEETINGS UNDER COVID PANDEMIC CONDITIONS ATTENDED BY INDIVIDUALS REPRESENTING APPROXIMATELY 350 MEMBER AND NONMEMBER COMPANIES TO EXCHANGE INFORMATION, VOTE ON ISSUES OF GENERAL CONCERN AND STAY INFORMED ON INDUSTRY MATTERS.

THE ASSOCIATION BEGAN EFFORTS DIRECTLY AND THROUGH OTHER ORGANIZATIONS ON INFLUENCING LEGISLATION THAT PROMOTES A FREE, FAIR, AND OPEN MARKET FOR THE RESALE, IMPORT AND EXPORT OF TECHNOLOGY EQUIPMENT AND SERVICES.

FORM 990, PART VI, LINE 6 - EXPLANATION OF CLASSES OF MEMBERS OR SHAREHOLDER

THERE IS ONLY ONE CLASS OF MEMBERSHIP AVAILABLE.

FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT GOVERNING BODY

MEMBERSHIP VOTE

FORM 990, PART VI, LINE 7B - DECISIONS OF GOVERNING BODY APPROVAL BY MEMBERS OR SHAREHOLDERS

ELECTS OFFICERS AND APPROVES ANNUAL BUDGET

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

FORM 990 IS DISTRIBUTED TO ALL THE BOARD MEMBERS FOR REVIEW AND APPROVAL BEFORE

FILING

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

OUARTERY REVIEW OF CONFLICTS

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT

BOARD OF DIRECTORS AND MEMBERSHIP VOTE

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

ALL DOCUMENTS ARE AVAILABLE UPON REQUEST AND ARE DELIVERED ELECTRONICALLY OR MAILED

TO THE REQUESTOR.

EAST THE PROPERTYON AND THE SEC OF CONTROL OF FROM SOUND SEED. THE SMALL SECTION SECTION SEED SEED OF ANY MONTH.

FORM DEFINED AT THE BY OCCURR DEGREEA FOUNDOCKFERTH PRACTOLY AVAILABLE.
FALL TOCCURREGE AND MAKEL WE TIRDS FEWDERS AND ARE DELICIOUS ELECTROPHISM OF WALLED

BONED OF DIRECTOR SERVICES WITH SERVICE WOLL

MORRE WOLDS OF THE 1877 CONSEQUATION OF A STATE BECOME THROUGH OR TO THE WARREST CONTRACTOR OF THE WARREST CONTRACTOR OF THE TOTAL PROPERTY.

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SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

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

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

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

ASSOCIATION OF SERVICE AND COMPUTER DEALERS INTERNATIONAL

Employer identification number

- Latte Latt												
(a) Name, address, and EIN (if applicable) of disregarded er	ntity	(b) Primary ac	ctivity	Legal dom or foreign	icile (state country)	То	(d) tal income	End-o	(e) f-year assets	Direc	(f) ct contro entity	lling
<u>(1)</u>												
(2)												
(3)												
Part II Identification of Related Tax-Exempt On had one or more related tax-exempt org	rganizati	ons. Complete	if the org	 ganization	answere	d 'Yes	on Form 99	0, Part	IV, line 34,	becau	se it	
Name, address, and EIN of related organization		(b) nary activity	Legal dom	c) nicile (state n country)	(d) Exempt section	Code	(e) Public charity (if section 501	status	Direct contro entity		Sec 512	(b)(13) d entity?
(1) A.S.C.D.I. CHARITABLE FOUNDATION 131 NW 1ST AVE DELRAY BEACH, FL 33444 41-1677640		HARITY		?L	3		PUBLI	۲	ASSOCIAT OF SERV AND COMP DEAL	ICE UTER	Yes	No X
(2)		IIIIIII I			3		TOBBI		DEAL	-		
(3)												
<u>(4)</u>												

Partity Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered 'Yes' on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

990) 2020	Schedule R (Form 990) 2020	Sch				07/15/20	TEEA5002L 07/15/20				BAA
 											
			 								(3)
					:						(2)
								-	<u> </u>		
							····		-		(1)
Sec 512(b)(13) controlled entity?	Percentage controlly controlly Yes	Share of end-of- year assets g		Share of total income	Type of entity (C corp, S corp, or trust)	Direct To Controlling (C) entity	Legal domicile (state or foreign country)	(b) Primary activity Le		a) of related organizat	(a) Name, address, and EIN of related organization
art IV,	orm 990, Pa	red 'Yes' on Fo	tion answe	organiza Juring the	plete if the n or trust d	a corporation	Corporation or ions treated as	Taxable as a sted organizati	mizations more rela	Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered 'Yes' on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.	Par IV Identification line 34, becau
										1	i
										<u> </u>	
											(2)
į											(1)
	Yes No	K-1 (Form 1065)					under sections 512-514)		foreign country)		
(k) Percentage ownership	General or managing partner?	Code V-UBI amount in box 20 of Schedule	(h) Disproportionate allocations?	(g) Share of end-of-year assets		Share of total income	(e) Predominant income (related, unrelated, excluded from tax	(d) Direct controlling	Legal domicile	Primary activity	(a) Name, address, and EIN of related organization



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?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity.	1 a		X
b	Gift, grant, or capital contribution to related organization(s)	1 b		X
С	Gift, grant, or capital contribution from related organization(s)	1 c		X
d	Loans or loan guarantees to or for related organization(s)	1 d		X
е	Loans or loan guarantees by related organization(s).	1 e		X
f	Dividends from related organization(s).	1f	SHEET STATE	Х
	Sale of assets to related organization(s).	1 g		X
~	Purchase of assets from related organization(s).	1h		X
	Exchange of assets with related organization(s).	1i		X
	Lease of facilities, equipment, or other assets to related organization(s)	1j		
J	20000 of Idollinoo, oquipmoniq of other about to related organization(o).	- 1		X
L	Lease of facilities, equipment, or other assets from related organization(s).	1k		v
	Performance of services or membership or fundraising solicitations for related organization(s).	1 K		X
		-		X
	n Performance of services or membership or fundraising solicitations by related organization(s).	1 m		X
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s).	1 n		X
0	Sharing of paid employees with related organization(s)	10		X
	Reimbursement paid to related organization(s) for expenses.	1 p	-	X
C	Reimbursement paid by related organization(s) for expenses	1 q		X
	Other transfer of cash or property to related organization(s)	1r		X
	Other transfer of cash or property from related organization(s)	1s		X
2	If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.			
	(a) (b) (c) Name of related organization Transaction Amount involved Meti	hod of	1)	ainina
		mount	involv	nining ed
1)				
.,				
21				
2)				
3)		****		
4)				
5)				
-/				
C				
6)				

Part 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.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unre- lated, excluded from tax under sections 512-514)	Are all p sec 501(organiz	partners tion c)(3) rations?	(f) Share of total income	(g) Share of end-of-year assets	Dispi	h) ropor- nate itions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana parti	i) ral or aging ner?	(k) Percentage ownership
	1		sections 512-514)	Yes	No			Yes	No	1 ` '	Yes	No	1
<u>(1)</u>													
<u>(2)</u>													
(3)	1												
(4)													
	<u> </u>												
(5)													
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(7)													
(8)													-
	<u>'</u>												

BAA

TEEA5004L 07/15/20 Schedule **R** (Form 990) 2020

Schedule R (Form 990) 2020 ASSOCIATION OF SERVICE AND COMPUTER

Provide additional information for responses to questions on Schedule R. See instructions.