THE POWER OF BEING UNDERSTOOD AUDIT | TAX | CONSULTING



Pacific Asia Travel Association C/O Cooper, White & Cooper, LLP 201 California St No. 1700 San Francisco, CA 94111

Pairoi:

Enclosed are the original and one copy of the 2020 Exempt Organization returns, as follows...

2020 Form 990

Form 114, Report of Foreign Bank and Financial Accounts

2020 California Form 199

We prepared the returns from the information furnished by you. Please review before filing to ensure there are no ommissions or misstatements of material facts. Please note that upon examination of the returns by taxing authorities, requests may be made for underlying data. We therefore recommend that you preserve all records which you may be called upon to produce in connection with such an examination.

Each original should be dated, signed and filed in accordance with the filing instructions. The copy should be retained for your files.

We sincerely appreciate the opportunity to serve you. Please contact us if you have any questions concerning the tax return.

Regards,

Christopher Cecil Senior Manager

THE POWER OF BEING UNDERSTOOD AUDIT | TAX | CONSULTING



Pacific Asia Travel Association C/O Cooper, White & Cooper, LLP 201 California St No. 1700 San Francisco, CA 94111

Pacific Asia Travel Association:

We have prepared and enclosed your 2020 Form 114, Report of Foreign Bank and Financial Accounts.

Form 114 has been prepared for electronic filing. Please sign, date, and return Form 114A to our office. We will then transmit your report to the FinCEN.

Return Form 114A to us by October 15, 2021.

A copy of the form is enclosed for your files. We suggest that you retain this copy indefinitely.

Regards,

Christopher Cecil

TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

December 31, 2020

Prepared For:

Pacific Asia Travel Association C/O Cooper, White & Cooper, LLP 201 California St No. 1700 San Francisco, CA 94111

Prepared By:

RSM US LLP 1555 Palm Beach Lakes Blvd., Suite 700 West Palm Beach, FL 33401

Amount Due or Refund:

Not applicable

Make Check Payable To:

Not applicable

Mail Tax Return and Check (if applicable) To:

Not applicable

Return Must be Mailed On or Before:

Not applicable

Special Instructions:

This return has qualified for electronic filing. After you have reviewed the return for completeness and accuracy, please sign, date and return Form 8879-EO to our office. We will transmit the return electronically to the IRS and no further action is required. Return Form 8879-EO to us by November 15, 2021

TAX RETURN FILING INSTRUCTIONS

REPORT OF FOREIGN BANK AND FINANCIAL ACCOUNTS

Prepared For:

Pacific Asia Travel Association C/O Cooper, White & Cooper, LLP 201 California St No. 1700 San Francisco, CA 94111

Prepared By:

RSM US LLP 1555 Palm Beach Lakes Blvd., Suite 700 West Palm Beach, FL 33401

Form Must be Filed On or Before:

Return Form(s) 114A to us by October 15, 2021.

Special Instructions:

Form(s) 114 have been prepared for electronic filing. Please sign, date, and return Form(s) 114A to our office. We will then transmit your report(s) to the FinCEN.

Form 114a Department of the Treasury Financial Crimes Enforcement Network (FinCEN)

Record of Authorization to **Electronically File FBARs**

(See instructions below for completion)

May 2015	Do not send t	o rincen. Retain th	is form for your records.			
	The	form 114a may be o	digitally signed		PACIF	IC20200001
Part I Persons who hav	e an obligation to file a Repor	t of Foreign Bank a	nd Financial Account(s)			
	's legal name AVEL ASSOCIATION TE & COOPER, LLE	1	2. Owner first name			3. Owner M.I.
4. Spouse last name (if joint	y filing FBAR - see instructions	below) 5	5. Spouse first name			6. Spouse M.I.
filing year ending December and complete; that I/we auth Report of Foreign Bank and listed in Part II to receive info	31, 2020 to the preparer I orize the preparer listed in Part Financial Accounts (FBAR) base ormation from FinCEN, answer i	isted in Part II; that t II to complete and s ed on the information nquiries and resolve	this information is to the best submit to the Financial Crimon that I/we have provided; and issues relating to this subm	t of my/our kr es Enforceme nd that I/we a lission. I/we a	nowledge nt Networ uthorize tl cknowlede	true, correct, k (FinCEN) a ne preparer ge that,
7. Owner signature (Authoriz	ed representative if entity)	8. Date	_	IN 10.	type b	SSN/ITIN
11. Spouse signature		12. Date	13. Spouse TIN	14. TIN type		EIN SSN/ITIN
4. Spouse last name (if jointly filing FBAR - see instructions below) 5. Spouse first name 6. Spouse M.I. I/we declare that I/we have provided information concerning 2 (enter number of accounts) foreign bank and financial account(s) for the filing year ending December 31, 2020 to the preparer listed in Part II; that this information is to the best or my/our knowledge true, correct, and complete; that I/we authorize the preparer listed in Part II to complete and submit to the Financial Crimes Enforcement Network (FinCEN) a Report of Foreign Bank and Financial Accounts (FBAR) based on the information that I/we have provided; and that I/we authorize the preparer listed in Part II to receive information from FinCEN, answer inquiries and resolve issues relating to this submission. I/we acknowledge that, notwithstanding this declaration, it is my/our legal responsibility, not that of the preparer listed in Part II, to timely file an FBAR if required by law to do so. 7. Owner signature (Authorized representative if entity) 8. Date 9. Owner or entity TIN 10. TIN a						
CONTROL CONTROL OF THE PROPERTY OF THE		4		17. Prepare		Secretarian Secre
19. Address		20. City		21. State	22. 7	ZIP/postal code
1555 PALM BEACH	LAKES BLVD., SU	J WEST PALM	BEACH	FL	334	01
code	eparer's (item 15) employer's (E US LLP	intity) name	25. Employer EIN **-***4325	26. Prepare	1500000553111550	ure
This record may be complete	Instructions for com	The state of the s	ignature Authorization Rec		orized to r	gerform such

services. The completed record must be signed by the individual(s)/entity granting the authorization (Part I) and the individual/entity that will file the FBAR. The Preparer/filing entity must be registered with FinCEN BSA E-File system. (See http://bsaefiling.fincen.treas.gov/main.html for registration).

Read and complete the account owner statement in Part I.

To authorize a third party to file the Foreign Bank and Financial Accounts Report (FBAR), the account owner should complete Part I, items 1 through 3 (as required), sign and date the document in Part I, items 7/8 and complete items 9 and 10. Item 7 may be digitally signed.

Accounts Jointly Owned by Spouses (see exceptions in the FBAR instructions)

If the account owner is filing an FBAR jointly with his/her spouse, the spouse must also complete Part I, items 4 through 6. The spouse must also sign and date the report in items 11/12, (item 11 may be digitally signed) and complete items 13 and 14. A third party preparer may be one of the spouses of the jointly owned foreign account. In this case, both spouses must complete Part I of form 114a in its entirety. The third party preparer (spouse) that will file the FBAR on behalf of both spouses will complete Part II in its entirety (do not use such terms as see above, or same as item number x).

Complete Part II, items 15 through 18 with the preparer's information. The address, items 19 through 23, is that of the preparer or the preparer's employer if the preparer is an employee. Record the employer's information (if any) in items 24 and 25. If the preparer does not have a PTIN, leave item 18 blank. The third party preparer must sign in item 26 (digital signature acceptable) of Part II indicating that the FBAR will be filed as directed by the authorizing authority.

The person(s) listed in Part I, and the person listed in Part II as authorized to file on behalf of the person(s) listed in Part I, should retain copies of this record of authorization and the filing itself, both for a period of 5 years. See 31 CFR 1010. 430(d). DO NOT SEND THIS RECORD TO FINCEN UNLESS REQUESTED TO DO SO.

	INO e-Ille Dignature Autiorizatio	п	OMB No. 1545-0047
Form 8879-EO	for an Exempt Organization		
	For calendar year 2020, or fiscal year beginning , 2020, and ending	, 20	2020
Department of the Treasury	Do not send to the IRS. Keep for your records.		ZUZU
Internal Revenue Service	▶ Go to www.irs.gov/Form8879EO for the latest informati		
Name of exempt organization	20 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Taxpayer id	entification number
	FRAVEL ASSOCIATION		
	HITE & COOPER, LLP	**_**	*4384
Name and title of officer or pe			
PAIROJ KIATTH	UNSAMAI		
CFO	7-4		
	Return and Return Information (Whole Dollars Only)		
	rn for which you are using this Form 8879-EO and enter the applicable amount,		
	2a, 3a, 4a, 5a, 6a, or 7a below, and the amount on that line for the return being 2b, 3b, 4b, 5b, 6b, or 7b, whichever is applicable, blank (do not enter -0-). But, it		
	e applicable line below. Do not complete more than one line in Part I.	r you entered to on the	7
			2 004 100
1a Form 990 check here			2,004,190.
2a Form 990-EZ check h			
3a Form 1120-POL chec			
4a Form 990-PF check h			
5a Form 8868 check her 6a Form 990-T check he		5D -	
7a Form 4720 check her	b Total tax (Form 4720, Part III, line 1)ion and Signature Authorization of Officer or Person Subjec	t to Tax	
	I declare that X I am an officer of the above organization or		ith respect to
(name of organization)			hat I have examined a co
I consent to allow my inter to receive from the IRS (a processing the return or re Agent to initiate an electro software for payment of the a payment, I must contact (settlement) date. I also au confidential information ne	e. I further declare that the amount in Part I above is the amount shown on the mediate service provider, transmitter, or electronic return originator (ERO) to se an acknowledgement of receipt or reason for rejection of the transmission, (b) fund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury nic funds withdrawal (direct debit) entry to the financial institution account indice e federal taxes owed on this return, and the financial institution to debit the entended that the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business of thorize the financial institutions involved in the processing of the electronic pay as my signature for the electronic return and, if applicable, the consent to electronic return and, if applicable, the consent to electronic return and, if applicable, the consent to electronic return and its position of the consent to electronic return and its position.	end the return to the IR) the reason for any de y and its designated Fi cated in the tax prepar try to this account. To days prior to the paym- ment of taxes to recei- ielected a personal	S and lay in nancial ation revoke ent
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a state agency(i	on the tax year 2020 electronically filed return. If I have indicated within this reles) regulating charities as part of the IRS Fed/State program, I also authorize the disclosure consent screen.		return is being filed with
electronically file	person subject to tax with respect to the organization, I will enter my PIN as my ed return. If I have indicated within this return that a copy of the return is being lies as part of the IRS Fed/State program. Will enter my PIN on the return's dis	filed with a state agen	cy(ies)
Signature of officer or person subje	et to tax Interest to tax Inte	Date	▶31/10/2021
	our six-digit electronic filing identification		
	your five-digit self-selected PIN. 606531 Do not ente		- ×
	meric entry is my PIN, which is my signature on the 2020 electronically filed retu eturn in accordance with the requirements of Pub. 4163, Modernized e-File (Mo		

IRS e-file Providers for Business Returns.

ERO's signature ▶ RSM US LLP

Date > 05/26/21

ERO Must Retain This Form - See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So

LHA For Paperwork Reduction Act Notice, see instructions.

Form 8879-EO (2020)

FINANCIAL CRIMES
ENFORCEMENT NETWORK

BSA E-Filing - Report of Foreign Bank and Financial Accounts (FBAR)

FinCEN Form 114

PACIFIC20200001

Submission Type	NEW			0	~	
		PIN	NOT REQU	VIRED		
k here X if this report	t is submitted by an authorize	d third party, and cor	nplete the 3rd p	arty preparer section	on on page or	ne of the
374	eived by the Department of the	Treasury on or before	April 15, 2021. A	n automatic extension	on to October	15, 2021
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	(0)					
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b. Did not know	that I had to file	1				
c Thought acco	ount balance was below reporti	ng threshold				
d. Did not know	that my account qualified as for	preign				
e. Account state	ement not received in time					
f. Account state	ement lost (Replacement reque	sted)				
g. Late receiving	g missing required account info	rmation				
h. Unable to obt	tain joint spouse signature in tir	ne				
i. Unable to acc	cess BSA E-filling system					
z. Other (please	provide explanation below)					

FinCEN Form 114

REPORT OF FOREIGN BANK AND FINANCIAL ACCOUNTS

Do NOT file with your Federal Tax Return

1 This report is for calendar year ended 12/31

2020

97											Amended			
Part I F	iler information	PACIFIC20200001 Pacification Pa												
2 Type of filer														
a Individ	dual b Partnership	c Corp	oration o	d 🔲 (Consolid	ated e	X Fid	luciary or of	her - Ente	er type	e TAX EXE	MP	T ORG	
3 U.S. Taxpay	er Identification Number	3a TIN type	4 Forei	gn iden	tification	(Comp	lete only if	item 3 is not	applicable	9				
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2600,470	PERCHAPITAL AND		unt(s) Owned Separately	FORM 114
Co	omplete a Separate Block for Ea	ach Account Owner	d Separately	H H
1	year X Taxpayer Ider 2020 Foreign Identi	ate Identification Number ntification Number fication Number ation number here:	6 Last Name or Organization Name PACIFIC ASIA TRAVI C/O COOPER, WHITE	
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17	Name of Financial Institution in which accounTHINA MINGSHENG BANG	t is held		
18	Account number or other designation ************************************	litution in which account is held		
20	City BEIJING	21 State, if known	DMENWAI AVENUE 22 ZIP/Postal Code, if known	23 Country CHINA
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17	Name of Financial Institution in which accoun	t is held		
18	Account number or other designation	19 Mailing Address (Numb	er, Street, Suite Number) of financial ins	titution in which account is held
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20	City	21 State, if known	22 ZIP/Postal Code, if known	23 Country

Form 8868

(Rev. January 2020)

Application for Automatic Extension of Time To File an Exempt Organization Return

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ▶ File a separate application for each return.
 ▶ Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

filing of th	is form, visit www.irs.gov/e-file-providers/e-file-for-cha	rities-and-n	on-profits.								
Automa	atic 6-Month Extension of Time. Only subr	mit origin	al (no copies needed).								
and the same of the same	ations required to file an income tax return other than F Form 7004 to request an extension of time to file incom			, REMICs	and trusts						
Type or print	Name of exempt organization or other filer, see instructions. PACIFIC ASIA TRAVEL ASSOCIATION C/O COOPER, WHITE & COOPER, LLP **-***4384										
File by the due date for filing your return. See	Number, street, and room or suite no. If a P.O. box, 201 CALIFORNIA ST, NO. 170	see instruc	tions.	5							
instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions. SAN FRANCISCO, CA 94111										
Enter the	Return Code for the return that this application is for (fi	ile a separa	te application for each return)			0 1					
Applicati	on	Return	Application			Return					
Is For		Code	Is For			Code					
	or Form 990-EZ	01	Form 990-T (corporation)			07					
Form 990		02	Form 1041-A			08					
	0 (individual)	03	Form 4720 (other than individual)			09					
Form 990	ACCOUNTS AND ACCOU	04	Form 5227			10					
	-T (sec. 401(a) or 408(a) trust) -T (trust other than above)	05 06	Form 6069 Form 8870			11					
Teleph	poks are in the care of \blacktriangleright 201 CALIFORNIA none No. \blacktriangleright (415)291-0330 organization does not have an office or place of business for a Group Return, enter the organization's four digit I if it is for part of the group, check this box	ss in the Ur t Group Exe	Fax No. ited States, check this box emption Number (GEN) I	f this is for	the whole gro	> up, check this					
the	quest an automatic 6-month extension of time until $\underline{}$ organization named above. The extension is for the organization representation of time until $\underline{\underline{X}}$ calendar year $\underline{\underline{2020}}$ or $\underline{}$ tax year beginning	ganization's		the exem	pt organization	return for					
2 . If th	ne tax year entered in line 1 is for less than 12 months, Change in accounting period	check reas	on: Initial return	Final retur	n						
	nis application is for Forms 990·BL, 990·PF, 990·T, 4720 nonrefundable credits. See instructions.	0, or 6069,	enter the tentative tax, less	За	\$	0.					
Samuel Committee	his application is for Forms 990-PF, 990-T, 4720, or 606	9, enter an	y refundable credits and	- 50							
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	ance due. Subtract line 3b from line 3a. Include your p										
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	If you are going to make an electronic funds withdrawa				d Form 8879-E	1587.0					

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2020)

EXTENDED TO NOVEMBER 15, 2021

Return of Organization Exempt From Income Tax

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

Form 990 (2020)

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

Inter	nal Reven	ue Service	➤ Go to www.irs.gov/	Form990 for instructions and	d the latest	t information.	Inspection						
A	For the	2020 calend	lar year, or tax year beginning	and	ending								
В	Check if	C Name o	of organization			D Employer identifie	cation number						
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\vdash	Name			121, 221		**_**43	84						
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S	5	Total number	of individuals employed in calendar y	ear 2020 (Part V, line 2a)		5	0						
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P	art II	Signatur	e Block			· ·							
Und	der pena	Ities of perjury,	I declare that I have examined this return,	including accompanying schedule	es and staten	nents, and to the best of m	y knowledge and belief, it is						
true	e, correc	t, and complete	e Declaration of preparer (other than office	r) is based on all information of w	hich prepare	er has any knowledge.							
0		×	Nac Nac										
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N4-	w the IF	RS discuss th	is return with the preparer shown abo		(3.1 (0.00e))	11 110110 110.50							
ivid	y tile II	io disouss III	io rotali i with the preparer shown abo	TO. OUD INSTRUCTIONS	***********	******************************	169 100						

PACIFIC ASIA TRAVEL ASSOCIATION C/O COOPER, WHITE & COOPER, LLP

Form	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?	-***4384	Page 2
			, 430
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1		******************	
		`F.	
		OURISM	
	INDUSTRY THROUGHOUT THE PACIFIC ASIA AREA.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
-		Vac	X No
		1es	22 140
			v
3		Yes	X No
	CONTROL MEDICAL MEDICA	A	
4		The state of the s	
		e total expenses, ar	nd
4a			833.
	EFFECTIVE, CUTTING-EDGE COMMUNICATIONS VEHICLES AND PUBLICI	TY	
	OPPORTUNITIES.		
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		CTIONS AND	
(4)	SOCIAL SUSTAINABILITY WITHIN THE INDUSTRY.		
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4c	(Code: \(\sum_{\text{Evapores}}\) (Fevapores \(\sum_{\text{196}}\) 118. Including graphs of \(\sum_{\text{evapores}}\)	98.	310.
		FURECASIS	,
	ISSUES AND TRENDS.		
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ Including grants of \$) (Revenue \$)	
4e	Total program service expenses ▶ 1,261,177.		
		Form 9	990 (2020

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Page 3

C/O COOPER, WHITE & COOPER, LLP Part IV | Checklist of Required Schedules

Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A X Is the organization required to complete Schedule B, Schedule of Contributors? 2 2 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 X 3 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 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 X 5 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 X 6 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 X 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete X 8 Did the organization report an amount in Part X, line 21, for excrow 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 X 9 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V 10 X If the organization's answer to any of the following questions is "Yes," then complete Schedule D. Parts VI, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, X 11a 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 X 11b c 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 X 11c d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 11d X e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X Schedule D. Parts XI and XII 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 X or more? If "Yes," complete Schedule F, Parts I and IV 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any X foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 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 X 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I X 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 18 1c and 8a? If "Yes." complete Schedule G, Part II X 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes." 19 X complete Schedule G, Part III 19 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H X 20a b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 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 X 21 Form 990 (2020)

Form 990 (2020)

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Form 990 (2020)

Form 990 (2020) C/O COOPER, WHITE & COOPER, LLP

Par	rt IV Checklist of Requ	ired Schedules (continued)			
				Yes	No
22	Did the organization report mo	ore than \$5,000 of grants or other assistance to or for domestic individuals on			2227
	Part IX, column (A), line 2? If	"Yes," complete Schedule I, Parts I and III	22		X
23		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			7/88/84
			. 23		X
24a		ax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was i	issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			225
	Schedule K. If "No," go to line	25a	24a		X
		ny proceeds of tax-exempt bonds beyond a temporary period exception?	24b	-	
C	4 - 1-19-19-19-7-19-19-19-19-19-19-19-19-19-19-19-19-19-	an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?		24c		
		n "on behalf of" issuer for bonds outstanding at any time during the year?	24d	-	1
25 a		and 501(c)(29) organizations. Did the organization engage in an excess benefit	Weekler -	-	
		person during the year? If "Yes," complete Schedule L, Part I	25a	-	_
b		tit engaged in an excess benefit transaction with a disqualified person in a prior year, and			
		neen reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
			25b	-	
26		ny amount on Part X, line 5 or 22, for receivables from or payables to any current			
		stee, key employee, creator or founder, substantial contributor, or 35%			v
	The second secon	mber of any of these persons? If "Yes," complete Schedule L, Part II	26	+	X
27		a grant or other assistance to any current or former officer, director, trustee, key employee,			
		al contributor or employee thereof, a grant selection committee member, or to a 35% controlled	C255		x
		thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	BURNE	Δ
28		to a business transaction with one of the following parties (see Schedule L, Part IV			1
		ng thresholds, conditions, and exceptions):	Untre	September 1	40027
а		rector, trustee, key employee, creator or founder, or substantial contributor? If	00-		х
la		Part IV			X
		idual described in line 28a? If "Yes," complete Schedule L, Part IV	200	1	21
C		Part IV	28c		Х
29		more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M			X
30		contributions of art, historical treasures, or other similar assets, or qualified conservation	23		
50	Section and the section of the secti	elete Schedule M	30		X
31		terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I			X
32		hange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	01		
52		nange, alspese of, of transfer more train 25% of its first assess. If Tes, complete	32		x
33	and the second s	% of an entity disregarded as separate from the organization under Regulations			
-		.7701-3? If "Yes," complete Schedule R, Part I	33		x
34		to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	4.4	1	
•		to any terror and the state of	34	Х	
35a		ontrolled entity within the meaning of section 512(b)(13)?	100	7.7	
	200	rganization receive any payment from or engage in any transaction with a controlled entity			
		i 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	X	
36		ons. Did the organization make any transfers to an exempt non-charitable related organization			
		R, Part V, line 2			
37		more than 5% of its activities through an entity that is not a related organization			
		ership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38		e Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
		required to complete Schedule O	38	X	
Par	rt V Statements Rega	arding Other IRS Filings and Tax Compliance			
	Check if Schedule O c	contains a response or note to any line in this Part V	411114141414		
		5a w		Yes	No
1a	Enter the number reported in	Box 3 of Form 1096. Enter -0- if not applicable	0		
b		/-2G included in line 1a. Enter -0- if not applicable 1b	0	1881	
c	Did the organization comply v	with backup withholding rules for reportable payments to vendors and reportable gaming	9.67		
	(gambling) winnings to prize v	vinners?	1c		1

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
20				
b	AND ADDRESS OF THE PROPERTY OF	2b	and the same of	
400			BENEFE P	37
		3a		X
		3b		-
4a			77	
b	If "Yes," enter the name of the foreign country \bigs THAILAND, CHINA	4a	X	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			0.00
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
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).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C				
	to file Form 8282?	7c	1010000	-
d				
e		7e		
f		7f		
g		7g 7h	_	-
h	to the calendar year ending with or within the year covered by this return seatone is reported on line 2a, did the organization file all required federal employment tax returns? If the sum of lines 1a and 2a is greater than 250, you may be required to a-rife (see instructions) he organization have unrelated business gross income of \$1,000 or more during the year? If the sum of lines 1a and 2a is greater than 250, you may be required to a-rife (see instructions) he organization have unrelated business gross income of \$1,000 or more during the year? If the sum of 160 foreign country be the year is the year in the year in the year is the year in the year is the year in the year in the year is the year in the year is the year in the year in the year is the organization on Schedule O If the year is the organization and the year is the organization and the year is the organization and party to a prohibited tax shelter transaction at any time during the tax year? In taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at yeing the organization have annual gross receipts that are normally greater than \$100,000, and did the organization she organization have annual gross receipts that are normally greater than \$100,000, and did the organization include with every solicitation an express statement that such contributions or gitts not tax deductible as charitable contributions? If the organization include with every solicitation an express statement that such contributions or gitts not tax deductible and year year year year year year year year		019020	Description of
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122	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10412	12a	NO:UNE	INCOME.
	그 사용 살아지는 그리고 가게 되었다. 그리고 그는 그는 그리고 그는 그는 그리고 그는 그리	120	17835	E914
13				
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			1200	278B
b				
		V 1027		
С				
14a	The state of the s	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on 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			
	France and the contraction of th	15		X
	If "Yes," see instructions and file Form 4720, Schedule N.			1
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.			
		Forr	n 990	(2020)

C/O COOPER, WHITE & COOPER, LLP

-*4384 Form 990 (2020) 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. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 66 1a Enter the number of voting members of the governing body at the end of the tax year 1a 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 66 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? X 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 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? X 6 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? Х 7a 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 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a b Each committee with authority to act on behalf of the governing body? X 8b 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 X 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? X 10a 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 X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 11a 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 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X 12b 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 Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? X 14 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 X 15a X b Other officers or key employees of the organization 15b 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 X taxable entity during the year? 16a 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? Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection, Indicate how you made these available. Check all that apply. Other (explain on Schedule O) Another's website Upon request Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of 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

(415)291-0330

201 CALIFORNIA ST, STE 1700, SAN FRANCISCO,

94111

PAIROJ KIATTHUNSAMAI -

C/O COOPER, WHITE & COOPER, LLP

-*4384

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

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

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

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

(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average		not c		more	than		Reportable	Reportable	Estimated
	hours per					is both or/trus		compensation	compensation from related	amount of other
	week (list any	-	Г		Π	Π		from the	organizations	compensation
	hours for	Individual trustee or director				p		organization	(W-2/1099-MISC)	from the
	related	tee or	ustee			ensate		(W-2/1099-MISC)		organization
	organizations	Itrus	Institutional trustee		Key employee	Highest compensated employee		W 4		and related
	below	vidua	titutio	Officer	ешр	hest o	Former			organizations
VII.	line)	in d	Ins	8	(e)	E E	P.			
(1) SOON-HWA WONG	0.50	١.,				1	P		0	0
CHAIRMAN	0.50	X		X	\vdash	4	5	0.	0.	0.
(2) VIET HAI	0.50				1.4	W.	d			0
VICE CHAIRMAN	0.50	X	_	X	4	lin.		0.	0.	0.
(3) SUMAN PANDEY	0.50					1	100			•
SECRETARY/TREASURER	0.50	X	-	X				0.	0.	0.
(4) CHRIS BOTTRILL	0.50		1	4						
PAST CHAIRMAN	0.50	X	7	X	7	-		0.	0.	0.
(5) JABED AHMMED	0.50		1	7	À					
BOARD MEMBER	0.50	X	-	1	1			0.	0.	0.
(6) NEETHIAHNANTHAN ARI RAGAVAN	0.50		-	4						
BOARD MEMBER	0.50	X		_	-	-	_	0.	0.	0.
(7) ANNA AU-YEUNG	0.50		6							
BOARD MEMBER	0.50	X	-		_			0.	0.	0.
(8) KARUN BUDHRAJA	0.50	1			-					
BOARD MEMBER	9	X	-	_	-	-	_	0.	0.	0.
(9) SHI-CHUNG CHANG	0.50	-								
BOARD MEMBER	0.50	X	_		- 2	-	-	0.	0.	0.
(10) STEPHEN CHANG	0.50						1			_
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(11) JENNIFER CHUN	0.50	-								
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(15) ERIC FONG	0.50	T	1						_	_
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(16) VINOOP GOEL	0.50	17						0	0	0
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(17) CARL GUTIERREZ	0.50	17						0.		
BOARD MEMBER		X	1	1	1	1	1	0.	0.	0.

Page 7

(A)	(B)			(C	100			(D)	(E)		. (F)	
Name and title	Average hours per week	box	, unle	Posi heck r ss per id a di	more son i	than o	an	Reportable compensation	Reportable compensation		Estimate	of
	(list any		Г					from the	from related organizations		other compensa	
	hours for	rustee or director	100			P		organization	(W-2/1099-MISC)		from th	
	related	tee or	ustee			ensafe		(W-2/1099-MISC)	3.5		organizat	tion
	organizations		mail tr		loyee	comp					and rela	
	below line)	Individual	Institutional t	Officer	Key employee	Highest compensated employee	Former				organizat	ons
18) ZOE HIBBERT	0.50		Ī		<u>x</u>		-		4			
OARD MEMBER		X	_					0.	C).		0
19) JIRAPON HIRUNRAT	0.50								AND SOME			
OARD MEMBER	0.50	X	_	1.2	_			0.).		0
20) ELLY HUTABARAT	0.50	١										^
OARD MEMBER	0.50	X	-				_	0.) .		0
21) OLIVIER JAGER	0.50	١.,										^
OARD MEMBER	0.50	X		-				0.) .		0
22) YOUHYUN JANG	0.50	x						0.				0
23) JEREMY JAUNCEY	0.50	21	\vdash						7	-		
BOARD MEMBER	0.50	x						A 0.).		0
24) RIKA JEAN-FRANCOIS	0.50		\top									
SOARD MEMBER		X						0.	().		0
25) ANDREW JONES	0.50									1000		
SOARD MEMBER		X				A	K	0.	().		0
(26) NOND KALINTA	0.50				- 4	1						
SOARD MEMBER		X			de	L	- 3	0.) •		0
1b Subtotal								0.).		0
c Total from continuation sheets to Pa								0.).		0
d Total (add lines 1b and 1c)								0.		0.		0
2 Total number of individuals (including		nose	liste	ed ab	DOVE	e) wh	o re	ceived more than \$100	000 of reportable			
compensation from the organization	_	4		~	A STATE OF THE PARTY OF THE PAR	-				-	Yes	N
3 Did the organization list any former o	fficer director trust	ee	kev i	empl	love	e o	hia	hest compensated emp	lovee on	1		199
line 1a? If "Yes," complete Schedule		~955		110	· · · · · · ·				200000000000000000000000000000000000000	250	3	X
4 For any individual listed on line 1a, is t			700									100
and related organizations greater than			HEROID								4	X
5 Did any person listed on line 1a receiv											124 (19)	100
rendered to the organization? If "Yes.		70			100						5	Σ
Section B. Independent Contractors		2		71.10.10.m.n.	No.							
1 Complete this table for your five higher	est compensated in	dep	ende	nt co	ontr	acto	rs th	nat received more than S	100,000 of compe	nsatio	on from	
the organization. Report compensation	n for the calendar y	ear	endi	ng w	/ith	or w	ithin	the organization's tax y	ear.			
	A)							(B)		0	(C)	
Name and bus		-		-	~ -			Description of		Co	mpensation	on
SIAM PIWAT COMPANY LIM					SI	AM		OFFICE RENTA			100 0	0.0
PIWAT TOWER, 989 RAMA	I ROAD, BA	TING	JOK	- /			_	UTILITIES EX	PENSE	_	192,8	86
		_		-	_							
												_
						0						
2 Total number of independent contract	tors (includina but r	not li	mite	d to	tho	se lis	sted	above) who received m	ore than			371
\$100,000 of compensation from the c	organization >	1				1						
SEE PART VII, SECT		ודיו	JIIZ	тт	ON	J S	HE	ETS		p	orm 990	1200

Form 990 (2020)

(B)

Average

hours per

week

(list any

hours for

related

organizations

below line)

0.50

0.50

0.50

0.50

0.50

0.50

0.50

0.50

0.50

0.50

0.50

0.50

0.50

0.50

0.50

0.50

0.50

0.50

0.50

0.50

(A)

Name and title

(27) ATHIKUN KONGMEE

(28) BENJAMIN LIAO

(30) MARK MANGLONA

(31) OLIVER MARTIN

(32) ABDULLA MAUSOOM

(33) MARY WAN MERING

(35) ANNA MOLANDER-BRY

(37) NGUYEN NGOC HOAI NGUYEN

(36) BEN MONTGOMERY

(38) BILL OBREITER

(39) HENRY OH, JR.

(40) NOREDAH OTHMAN BOARD MEMBER

(41) ASITHA PANABOKKE

(29) JETRO NICOLAS F. LOZADA

BOARD MEMBER

BOARD MEMBER (45) JOHN QUINATA

BOARD MEMBER

BOARD MEMBER

(42) MAYUR PATEL

(43) RAKI PHILLIPS

(46) TAUFIQ RAHMAN

(44) ATTHAWET PROUGESTAPORN

Total to Part VII, Section A, line 1c

(34) AL MERSCHEN

Highest compensated

Key employee

Position

(check all that apply)

nstitutional trustee

ndividual trustee

-*4384 Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (F) Reportable Reportable Estimated compensation compensation amount of from from related other compensation the organizations (W-2/1099-MISC) organization from the (W-2/1099-MISC) organization and related organizations 0. 0. 0. 0._ 0._ 0.

0.

0.

0.

0.

0.

0.

Part VII Section A. Officers, Directors, Tru (A)	(B)			(0	2)	(0)		(D)	(E)	(F)
Name and title	Average			Pos				Reportable	Reportable	Estimated
	hours	(cl	neck	all t	that	app	ly)	compensation	compensation	amount of
	per					93		from the	from related	other
	week (list any	tör				ploye		organization	organizations (W-2/1099-MISC)	compensation from the
	hours for	or director	50			шара		(W-2/1099-MISC)	(IV E) TOOD IMICO)	organization
	related	trustee or	ustee		0.029	ensat		CONTRACTOR	A Total	and related
	organizations	al trus	onal tr		layee	сошь		(a)		organizations
	below	Individual	Institutional trustee	Officer	Key employee	Highest compensated employee	Former		A	
	line)	In In	ä	5	×	王	22			
(47) G. KAMALA RAO, IAS BOARD MEMBER	0.50	х		l á				0.	0.	0
(48) DHANANJAY REGMI	0.50	Δ	_					0.	U.	U
BOARD MEMBER	0.50	X				ß		0.	0.	0
(49) MOHAMED SALLAUDDIN H.J. MAT SAH	0.50	A	-		_		_	0.	0.	
BOARD MEMBER	0.30	X						0.	0.	0
(50) SANJEET	0.50	22							0.	0
BOARD MEMBER	0.50	x						0.	0.	0
(51) PETER SEMONE	0.50	-							9	
BOARD MEMBER		X					- 54	0.	0.	0
(52) JAE-PIL SHO	0.50							W A		
BOARD MEMBER		X						0.	0.	0
(53) LENNA SHULGA	0.50							The state of the s		
BOARD MEMBER		X					1	0.	0.	0
(54) ARVIND SINGH	0.50					A	K			
BOARD MEMBER	4	X			1		-	0.	0.	0
(55) KAMIKA SMITH	0.50				400		-			
BOARD MEMBER		X			d			0.	0.	0
(56) WENDY SOWERS	0.50		- 4	18						
BOARD MEMBER		X		1				0.	0.	0
(57) FAAMATUAINE LENATA'I SUIFUA	0.50	A	1	4	4	-		12		27 2
BOARD MEMBER	0.50	X	1	7	.0		_	0.	0.	0
(58) YUTHASAK SUPASORN	0.50			6	P					-
BOARD MEMBER	0.50	X		-				0.	0.	0
(59) JATINDER TANEJA	0.50									
BOARD MEMBER	0.50	X	-					0.	0.	0
(60) DIMUTHU TENNAKOON BOARD MEMBER	0.50	x						0.	0.	
(61) BIBHUTI CHAND THAKUR	0.50	A	-	-	-	-	-	0.	0.	0
BOARD MEMBER	0.50	x					್	0.	0.	0
(62) RATHASAK THONG	0.50	Λ						0.	0.	0
BOARD MEMBER	0.50	х						0.	0.	0
(63) JUDY TORRES	0.50							0.	0.	0
BOARD MEMBER		x						0.	0.	0
(64) FANNY VONG	0.50	1								
BOARD MEMBER		X						0.	0.	0
(65) KHIN THAN WIN	0.50			1						
BOARD MEMBER		X						0.	0.	0
(66) MUSA YUSOF	0.50									
BOARD MEMBER		X	1		1			0.	0.	0

-*4384

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C/O COOPER, WHITE & COOPER, LLP

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) Unrelated Revenue excluded Related or exempt Total revenue from tax under function revenue business revenue sections 512 - 514 Federated campaigns 1a Grants b Membership dues 1b c Fundraising events 10 d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f h Total. Add lines 1a-1f **Business Code** 363,345.1 ,363,345. 900099 2 a MEMBERSHIP Program Service 271,263. **b** EVENT REVENUE 900099 271,263. 226,490. c HUMAN CAPITAL DEVELOPM 900099 226,490. 98,310. 14,998. d STATEGIC INTELLIGENCE 900099 98,310. 14,998. e OTHER PROGRAMS 900099 f All other program service revenue 974,406. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 21,010. 21,010. other similar amounts) Income from investment of tax-exempt bond proceeds 4 5 (i) Real (ii) Personal 6 a Gross rents 6a b Less: rental expenses 6b c Rental income or (loss) 6c d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis Other Revenue and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses 8b c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances 10b b Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code** 11 a OTHER INCOME **Miscellaneous** 900099 8,774. 8,774. b d All other revenue 8,774. e Total. Add lines 11a-11d ▶ 2,004,190.2,004,190. 0. 0. 12 Total revenue. See instructions Form 990 (2020)

032009 12-23-20

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 (B) Program service (C) Management and general expenses (**D**) Fundraising (A) Total expenses Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV. line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 1,402,108. 604,001. 798,107. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 50,397. 50,397. Payroll taxes 10 Fees for services (nonemployees): a Management Accounting d Lobbying e Professional fundraising services. See Part IV. line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) Advertising and promotion 12 Office expenses 13 Information technology 14 Royalties 15 209,129. 147,239. 61,890. 16 Occupancy 32,436. 11.972. 20,464. 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials ... Conferences, conventions, and meetings 19 20 Payments to affiliates 21 34,342. 21,562. 12,780 Depreciation, depletion, and amortization 22 23 Other expenses, Itemize expenses not covered 24 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.) DIRECT EXPENSES 296,591. 290,513. 6,078. PROFESSIONAL FEES 149,915. 92,388. 57,527. c GENERAL & ADMIN. 88,277. 31,669. 56,608. d EDP COST 87,680. 60,576. 27,104. 1,644. 1,257. 387. All other expenses 2,352,519. 261,177. 091,342. 0. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation, Check here if following SOP 98-2 (ASC 958-720)

Form 990 (2020)

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X (B) End of year (A) Beginning of year 879,886. 493,296. Cash - non-interest-bearing 1 Savings and temporary cash investments 302,335. 305,182. 2 2 3 Pledges and grants receivable, net 3 194,612. 133,929. Accounts receivable, net 4 4 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 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 Notes and loans receivable, net 7 Inventories for sale or use 8 109,996. 102,854. Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment; cost or other basis. Complete Part VI of Schedule D 10a b Less: accumulated depreciation 100,762. 95,562. 10b 10c 11 Investments - publicly traded securities 11 Investments - other securities. See Part IV, line 11 12 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 Other assets. See Part IV, line 11 15 15 1,587,591. 1,130,823. 16 Total assets. Add lines 1 through 15 (must equal line 33) 16 Accounts payable and accrued expenses 70,432. 83,659. 17 17 18 Grants payable 18 39,363. 116,314. 19 Deferred revenue 19 Tax-exempt bond liabilities 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to any current or former officer, director, 22 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 Unsecured notes and loans payable to unrelated third parties 24 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 710,665. 512,048. of Schedule D 25 Total liabilities, Add lines 17 through 25 820,460. 712,021. 26 26 Organizations that follow FASB ASC 958, check here X Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. Net assets without donor restrictions 767,131. 418,802. 27 27 Net assets with donor restrictions 28 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds 29 29 Paid-in or capital surplus, or land, building, or equipment fund 30 30 31 Retained earnings, endowment, accumulated income, or other funds 31 418,802. 767,131. 32 Total net assets or fund balances 32 1,587,591. 1,130,823. Total liabilities and net assets/fund balances 33

PACIFIC ASIA TRAVEL ASSOCIATION C/O COOPER, WHITE & COOPER, LLP

Form	990 (2020) C/O COOPER, WHITE & COOPER, LLP	**_*	**4384	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				10
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,004		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,352		
3	Revenue less expenses. Subtract line 2 from line 1	3	-348		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	76	7,1	31.
5	Net unrealized gains (losses) on investments	5			
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	418	3,8	02.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		*************		X
7.5				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other	P			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed		1000		allie.
	separate basis, consolidated basis, or both:		161		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat		100	in the	Stock
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit	0.200,000		
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sci			passe.	10000
32	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si		707625		LEGIS AND
Ja	Act and OMB Circular A-133?	igie Addit	3a		х
h.	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	irod audit	3a		21
D	Tes, did the organization undergo the required addition addition the organization did not directly the required additional and the organization did not directly the required additional and the organization did not directly the required additional and the organization did not directly the required additional and the organization did not directly the required additional and the organization did not directly the required additional and the organization did not directly the required additional and the organization did not directly the required additional and the organization did not directly the required additional and the organization did not directly the required additional and the organization did not directly the required additional and the organization did not directly the required additional and the organization did not directly the required additional and the organization did not directly the required additional and the organization did not directly the required additional and the organization did not directly the required additional and the organization did not directly the required additional and the organization did not directly the required additional and the organization did not directly and the organization did not directly and the organization did not discovered and disc	neu auult	- 05		

Form 990 (2020)

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

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.

Tax) (See separate instructi	ons), then 6) organizations: Complete Part III.	Tax) (See Separate	instructions) or Form 990-1	EZ, Part V, line 35c (Proxy
Name of organization PA	ACIFIC ASIA TRAVEL ASSO O COOPER, WHITE & COOP	ER, LLP		oyer identification number
Part I-A Complete	f the organization is exempt unde	r section 501(c)	or is a section 527 or	ganization.
2 Political campaign activi	the organization's direct and indirect politica ty expenditures ical campaign activities		▶ \$	· ·
Part I-B Complete	f the organization is exempt unde	r section 501(c)	(3).	
2 Enter the amount of any3 If the organization incurr4a Was a correction made?b If "Yes," describe in Part		rs under section 4955 or this year?	▶ \$	Yes No
Part I-C Complete	f the organization is exempt unde	r section 501(c)	, except section 501(c)(3).
 2 Enter the amount of the exempt function activitie 3 Total exempt function end line 17b 4 Did the filing organizatio 5 Enter the names, address made payments. For eac contributions received the 	y expended by the filing organization for sec filing organization's funds contributed to oth is expenditures. Add lines 1 and 2. Enter here an in file Form 1120-POL for this year? esses and employer identification number (EIN ich organization listed, enter the amount paid that were promptly and directly delivered to a	er organizations for some of the control of the control of all section 527 per from the filing organise parate political organise.	section 527 \$ \$ Solitical organizations to which ization's funds. Also enter the ganization, such as a separat	Yes No the filing organization amount of political
political action committe (a) Name	e (PAC). If additional space is needed, provide (b) Address	de information in Parl	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
1811				
		5-		

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

Schedule C (Form 990 or 990-EZ) 2020

Schedule C (Form 990 or 990-EZ) 2020 C/O Part II-A Complete if the organiza	COOPER tion is exe	, WHITE & COOP mpt under section 5	PER , LLP 01(c)(3) and file		***4384 Page 2 ection under
section 501(h)).		was all and a same a same and a same a same a			The second secon
A Check ▶ ☐ if the filing organization be			art IV each affiliated o	roup member's nam	ie, address, EIN,
expenses, and share of ex	100	190			
B Check ▶ if the filing organization ch	ecked box A	and "limited control" provis	sions apply.		
Limits on L (The term "expenditures	obbying Expo			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence	public opinion	(grassroots lobbying)	outrous conservations		
b Total lobbying expenditures to influence					
c Total lobbying expenditures (add lines 1a	and 1b)		.,	A	
e Total exempt purpose expenditures (add				Attended	
f Lobbying nontaxable amount. Enter the a			STATISTICAL CONTRACTOR OF THE		
If the amount on line 1e, column (a) or (b) is:	CO TO REMERCIONES	bbying nontaxable amou	7.000	THE RESERVE	
Not over \$500,000	armato interest	f the amount on line 1e.	III io.		
Over \$500,000 but not over \$1,000,000		000 plus 15% of the excess	2 2 2 2 5 00 000		
			4000		
Over \$1,000,000 but not over \$1,500,000		000 plus 10% of the excess	557		
Over \$1,500,000 but not over \$17,000,00		000 plus 5% of the excess	over \$1,500,000.		
Over \$17,000,000	\$1,000	0,000.			
h Subtract line 1g from line 1a. If zero or les i Subtract line 1f from line 1c. If zero or les j If there is an amount other than zero on e reporting section 4911 tax for this year?	s, enter -0 either line 1h o 4-Year A	veraging Period Under Se	on file Form 4720		Yes No
(Some organizations that ma		501(h) election do not ha erate instructions for lines		the five columns b	oelow.
	obbying Exp	enditures During 4-Year	Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2a Lobbying nontaxable amount	4				8.8
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					*
d Grassroots nontaxable amount					
e Grassroots ceiling amount					No.
(150% of line 2d, column (e))					4
A control of the second of the					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2020

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Schedule C (Form 990 or 990-EZ) 2020 C/O COOPER, WHITE & COOPER, LLP **-**43

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

of the lobbying activity. 1 During the year, did the					
1 During the year, did the		Yes	No	Amo	ount
	filing organization attempt to influence foreign, national, state, or		FRESTA I		
local legislation, includir	ng any attempt to influence public opinion on a legislative matter				
or referendum, through	the use of:				
a Volunteers?					
b Paid staff or manageme	nt (include compensation in expenses reported on lines 1c through 1i)?		A .		
c Media advertisements?			100		
d Mailings to members, le	gislators, or the public?				
e Publications, or published	ed or broadcast statements?		1		
f Grants to other organiza	ations for lobbying purposes?	1			37
	slators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations,	seminars, conventions, speeches, lectures, or any similar means?				
j Total. Add lines 1c throu	ugh 1i				
	1 cause the organization to be not described in section 501(c)(3)?				
	int of any tax incurred under section 4912				
c If "Yes," enter the amou	int of any tax incurred by organization managers under section 4912	A. (500)			
	incurred a section 4912 tax, did it file Form 4720 for this year?				
art III-A Complete it	f the organization is exempt under section 501(c)(4), sec	ction 501(c)	(5), or sec	tion	
E04/ \/0\					
501(c)(6).				Yes	N
			-		
Were substantially all (9	0% or more) dues received nondeductible by members?		1	X	
Were substantially all (9) Did the organization ma	ke only in-house lobbying expenditures of \$2,000 or less?	*****************	2		2
1 Were substantially all (9) 2 Did the organization ma 3 Did the organization agreat III-B Complete if 501(c)(6) an	ke only in-house lobbying expenditures of \$2,000 or less? ee to carry over lobbying and political campaign activity expenditures fro f the organization is exempt under section 501(c)(4), see ad if either (a) BOTH Part III-A, lines 1 and 2, are answer	m the prior yea	2 ?? 3 (5), or sec	X	2
1 Were substantially all (9/2 Did the organization mail 3 Did the organization agrart III-B Complete if 501(c)(6) an answered "	ke only in-house lobbying expenditures of \$2,000 or less? ee to carry over lobbying and political campaign activity expenditures fro f the organization is exempt under section 501(c)(4), see ad if either (a) BOTH Part III-A, lines 1 and 2, are answer Yes."	m the prior yea ction 501(c) ed "No" OF	2 3 (5), or sec (b) Part I	X	2
Were substantially all (90) Did the organization mage art III-B Complete if 501(c)(6) an answered " Dues, assessments and	ke only in-house lobbying expenditures of \$2,000 or less? ee to carry over lobbying and political campaign activity expenditures fro f the organization is exempt under section 501(c)(4), sec and if either (a) BOTH Part III-A, lines 1 and 2, are answer lyes."	m the prior yea ction 501(c) ed "No" OF	2 3 (5), or sec (b) Part I	X	2
Were substantially all (90 Did the organization mage art III-B Complete it 501(c)(6) an answered " Dues, assessments and Section 162(e) nondedu	ke only in-house lobbying expenditures of \$2,000 or less? ee to carry over lobbying and political campaign activity expenditures fro f the organization is exempt under section 501(c)(4), sec nd if either (a) BOTH Part III-A, lines 1 and 2, are answer 'Yes." similar amounts from members	m the prior yea ction 501(c) ed "No" OF	2 3 (5), or sec (b) Part I	X	2
Were substantially all (90 2 Did the organization mails Did the organization agrant III-B Complete if 501(c)(6) an answered " Dues, assessments and 2 Section 162(e) nondeduexpenses for which the a Current year	ke only in-house lobbying expenditures of \$2,000 or less? see to carry over lobbying and political campaign activity expenditures fro f the organization is exempt under section 501(c)(4), see ad if either (a) BOTH Part III-A, lines 1 and 2, are answer Yes." similar amounts from members ctible lobbying and political expenditures (do not include amounts of p a section 527(f) tax was paid).	m the prior yea ction 501(c) ed "No" OF olitical	2 3 (5), or sec (b) Part II	X	2
Were substantially all (9) Did the organization mais Did the organization agr art III-B Complete if 501(c)(6) an answered " Dues, assessments and Section 162(e) nondedu expenses for which the a Current year	ke only in-house lobbying expenditures of \$2,000 or less? see to carry over lobbying and political campaign activity expenditures fro f the organization is exempt under section 501(c)(4), see ad if either (a) BOTH Part III-A, lines 1 and 2, are answer Yes." similar amounts from members ctible lobbying and political expenditures (do not include amounts of p a section 527(f) tax was paid).	m the prior yea ction 501(c) ed "No" OF olitical	2 3 (5), or sec (b) Part II	X	2
Were substantially all (9) Did the organization mass Did the organization agrart III-B Complete if 501(c)(6) an answered " Dues, assessments and Section 162(e) nondedu expenses for which the a Current year b Carryover from last year	ke only in-house lobbying expenditures of \$2,000 or less? see to carry over lobbying and political campaign activity expenditures fro f the organization is exempt under section 501(c)(4), see ad if either (a) BOTH Part III-A, lines 1 and 2, are answer lyes." similar amounts from members cible lobbying and political expenditures (do not include amounts of p as section 527(f) tax was paid).	m the prior yea ction 501(c) ed "No" OF	2 3 (5), or sec (b) Part II	X	2
Dues, assessments and Section 162(e) nondedu expenses for which the a Current year c Total	ke only in-house lobbying expenditures of \$2,000 or less? see to carry over lobbying and political campaign activity expenditures fro f the organization is exempt under section 501(c)(4), see ad if either (a) BOTH Part III-A, lines 1 and 2, are answer lyes." similar amounts from members ctible lobbying and political expenditures (do not include amounts of p e section 527(f) tax was paid).	m the prior yea ction 501(c) ed "No" OF olitical	2 3 (5), or sec (b) Part II	X	2
Mere substantially all (9) Did the organization ma Did the organization agr art III-B Complete if 501(c)(6) an answered " Dues, assessments and Section 162(e) nondedu expenses for which the Current year Carryover from last year Total Aggregate amount repo	ke only in-house lobbying expenditures of \$2,000 or less? see to carry over lobbying and political campaign activity expenditures fro f the organization is exempt under section 501(c)(4), see ad if either (a) BOTH Part III-A, lines 1 and 2, are answer lyes." similar amounts from members cible lobbying and political expenditures (do not include amounts of p as section 527(f) tax was paid).	m the prior yea ction 501(c) ed "No" OF olitical	2 3 (5), or sec (b) Part II	X	2
Mere substantially all (9) Did the organization mail Did the organization agrart III-B Complete it 501(c)(6) an answered " Dues, assessments and Section 162(e) nondedu expenses for which the Current year Carryover from last year Total Aggregate amount repo	ke only in-house lobbying expenditures of \$2,000 or less? see to carry over lobbying and political campaign activity expenditures fro f the organization is exempt under section 501(c)(4), see ad if either (a) BOTH Part III-A, lines 1 and 2, are answer lyes." similar amounts from members cible lobbying and political expenditures (do not include amounts of p e section 527(f) tax was paid). rted in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	m the prior yea ction 501(c) ed "No" OF olitical	2 3 (5), or sec (b) Part II	X	2
Were substantially all (9) Did the organization mai Did the organization agr art III-B Complete it 501(c)(6) an answered " Dues, assessments and Section 162(e) nondedu expenses for which the Current year Carryover from last year Total Aggregate amount repo	ke only in-house lobbying expenditures of \$2,000 or less? ee to carry over lobbying and political campaign activity expenditures fro f the organization is exempt under section 501(c)(4), see and if either (a) BOTH Part III-A, lines 1 and 2, are answer Yes." similar amounts from members ctible lobbying and political expenditures (do not include amounts of particular expenditures) a section 527(f) tax was paid). red in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues the amount on line 2c exceeds the amount on line 3, what portion of the gree to carryover to the reasonable estimate of nondeductible lobbying and	m the prior yea ction 501(c) ed "No" OF olitical	2 3 (5), or sec (b) Part II 2a 2b 2c 3	X	2
Were substantially all (9) Did the organization mais Did the organization agrart III-B Complete if 501(c)(6) an answered " Dues, assessments and Section 162(e) nondedu expenses for which the Current year Carryover from last year Total Aggregate amount repo If notices were sent and does the organization ag expenditure next year? Taxable amount of lobby	ke only in-house lobbying expenditures of \$2,000 or less? see to carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), see and if either (a) BOTH Part III-A, lines 1 and 2, are answer less." similar amounts from members citible lobbying and political expenditures (do not include amounts of page section 527(f) tax was paid). The interval of the section 6033(e)(1)(A) notices of nondeductible section 162(e) dues the amount on line 2c exceeds the amount on line 3, what portion of the	m the prior yea ction 501(c) ed "No" OF olitical	2 3 (5), or sec (b) Part II 2a 2b 2c 3	X	2

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

PACIFIC ASIA TRAVEL ASSOCIATION

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

C/O COOPER. WHITE & COOPER

Employer identification number **_***1381

Pa		Funds or Other Similar Funds	or Accou	ints. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	(a) Donor advised funds	(b) Fu	inds and other accounts
1	Total number at end of year		1-7	
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)		1	A
4	Aggregate value at end of year		1	
5	Did the organization inform all donors and donor advisors in w	iting that the assets held in donor advi	sed funds	
	are the organization's property, subject to the organization's ex	가족:		Yes No
6	Did the organization inform all grantees, donors, and donor adv			
	for charitable purposes and not for the benefit of the donor or			
			The second secon	Yes No
Pa	rt II Conservation Easements. Complete if the orga	inization answered "Yes" on Form 990,	Part IV, line	7.
1	Purpose(s) of conservation easements held by the organization		W	
	Preservation of land for public use (for example, recreation		of a historical	y important land area
	Protection of natural habitat			nistoric structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifie	d conservation contribution in the form	of a conserv	ation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements			-
C	Number of conservation easements on a certified historic struc	ture included in (a)	2c	
d	Number of conservation easements included in (c) acquired aft			
	listed in the National Register		2d	
3	Number of conservation easements modified, transferred, release			n during the tax
	year ▶	4		
4	Number of states where property subject to conservation ease	ment is located >		
5	Does the organization have a written policy regarding the period	dic monitoring, inspection, handling of		
	violations, and enforcement of the conservation easements it h	olds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, ha	andling of violations, and enforcing cor	servation eas	sements during the year
	-			
7	Amount of expenses incurred in monitoring, inspecting, handling	ng of violations, and enforcing conserv	ation easeme	nts during the year
	> \$			
8	Does each conservation easement reported on line 2(d) above			
	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservation			
	balance sheet, and include, if applicable, the text of the footno	te to the organization's financial staten	nents that de	scribes the
-	organization's accounting for conservation easements.			
Pa	rt III Organizations Maintaining Collections of A		ther Simil	ar Assets.
N.	Complete if the organization answered "Yes" on Form 9			
1a	If the organization elected, as permitted under FASB ASC 958,			
	of art, historical treasures, or other similar assets held for publi			f public
100	service, provide in Part XIII the text of the footnote to its finance			
b	If the organization elected, as permitted under FASB ASC 958,	50 (P.) - [[[[[[[[[[[[[[[[[[
	art, historical treasures, or other similar assets held for public e	exhibition, education, or research in fur	therance of p	ublic service,
	provide the following amounts relating to these items:		100	
	(i) Revenue included on Form 990, Part VIII, line 1			\$
0.00000		***************************************	***********	\$
2	If the organization received or held works of art, historical treas		al gain, provi	de
	the following amounts required to be reported under FASB AS	3		
a	Revenue included on Form 990, Part VIII, line 1			\$
b	Assets included in Form 990, Part X			\$

-	t III Organizations Maintaining C	collections of Art				te 4384	
30.00	Using the organization's acquisition, accessi						ied)
3	collection items (check all that apply):	on, and other records	, crieck any or the i	ollowing triat make	e significant use of it	5	
•	Public exhibition	al .	Loop or ove	hanaa neassan			
a	Scholarly research	a	The state of the state of the state of	hange program			
b	Preservation for future generations	е	Other				
4	그가 그렇게 되어야한 하는데 맛있었다면 얼마난데요 되었다면 되었다면 되었다.	alloctions and syntain	have they freshed the	o organizationia a	verent numera in De	at VIII	
-	Provide a description of the organization's co			and the control of the state of		rt XIII.	
5	During the year, did the organization solicit of to be sold to raise funds rather than to be ma						
Pai	t IV Escrow and Custodial Arran	gements Cample	to if the averagestic	nection?	F 000 D-+ 0	Yes	No
1.00	reported an amount on Form 990, Pa		te ii the organizatio	n answered Yes	on Form 990, Part I	7, line 9, or	
12	Is the organization an agent, trustee, custodi		en for contributions	or other seeds o	ot included		
Id	on Form 990, Part X?				The state of the s	Yes	X No
h	If "Yes," explain the arrangement in Part XIII			******************		res	V NO
b	ir res, explain the arrangement in rait XIII	and complete the lon	owing table.			Amount	
	Beginning balance				10	Amount	
d	Additions during the year						
	Distributions during the year						
f	Ending balance						
	Did the organization include an amount on F	orm 990 Part Y line	21 for escroyy or or	etodial account lis	ability?	Yes	No
	If "Yes," explain the arrangement in Part XIII.					165	
Par						************	
NO POLICE	Complete	(a) Current year	(b) Prior year	(c) Two years back	the state of the s	ck (a) Four	veare back
1a	Beginning of year balance	178,500.	178,500.	178,500			178,500.
b	Contributions			1		-	,
C	Net investment earnings, gains, and losses		ALC:				
d	Grants or scholarships		1790		_		
	Other expenditures for facilities		A 10	b			
•	and programs						
f	Administrative expenses		All Comments of the Comments o				
a	End of year balance	178,500.	178,500.	178,500	178,50	0.	178,500.
2	Provide the estimated percentage of the curr			V. V			
a	Board designated or quasi-endowment		%	y ricia as.			
b	Permanent endowment ▶	%					
		%	66°				
•	The percentages on lines 2a, 2b, and 2c sho						
3a	Are there endowment funds not in the posse		tion that are held ar	nd administered fo	r the organization		
ou	by:	Solom of the organiza	and that are there are	administered to	Title organization		Yes No
	(i) Unrelated organizations					3a(i)	X
	(ii) Related organizations						X
b	If "Yes" on line 3a(ii), are the related organiza	itions listed as require	ed on Schedule R?		*******************	3b	
4	Describe in Part XIII the intended uses of the			*************************		[00]	
	t VI Land, Buildings, and Equipm		THORE ISSUED				
	Complete if the organization answere	d "Yes" on Form 990	Part IV. line 11a. S	ee Form 990. Part	X. line 10.		
	Description of property	(a) Cost or of) Accumulated	(d) Book	value
		basis (investm	nent) basis	(other)	depreciation		
	Land						
b	Buildings						
C	Leasehold improvements			0,804.	355,531.		,273.
d	Equipment			6,314.	348,495.		,819.
	Other			4,182.	91,712.		,470.
Total	. Add lines 1a through 1e. (Column (d) must e	aual Form 990, Part	(, column (B), line 1	0c.)	>	95	,562.

-*4384 Page 3 C/O COOPER, WHITE & COOPER, LLP Schedule D (Form 990) 2020 Part VII Investments - Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12. (a) Description of security or category (including name of security) (c) Method of valuation: Cost or end-of-year market value (b) Book value (1) Financial derivatives (2) Closely held equity interests (3) Other (A) (B) (C) (D) (E) (F) (G) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (c) Method of valuation: Cost or end-of-year market value (b) Book value (1) (2) (3) (4) (5) (6) (7)(8) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)

Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (b) Book value (a) Description of liability 1. (1) Federal income taxes 271,083. MEMBERSHIP DUES PAID IN ADVANCE

(2) MEMBERSHIP DUES PAID IN ADVANCE 271,083.

(3) PROVISION FOR EMPLOYEE BENEFIT 240,965.

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

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

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

PACIFIC ASIA TRAVEL ASSOCIATION C/O COOPER, WHITE & COOPER, LLP

032054 12-01-20

Schedule D (Form 990) 2020 C/O COOPER, WHITE & CO	OOPER, LLP	**_*	**4384 Page 4
Part XI Reconciliation of Revenue per Audited Financial S			
Complete if the organization answered "Yes" on Form 990, Part IV	/, line 12a.		
1 Total revenue, gains, and other support per audited financial statements		1	2,004,190.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		250	
a Net unrealized gains (losses) on investments	2a		
b Donated services and use of facilities	2b		
c Recoveries of prior year grants	2c	72.5	
d Other (Describe in Part XIII.)	STOCK STREET, STOCK STOC		
e Add lines 2a through 2d	A1710 Processor 1	2e	0.
3 Subtract line 2e from line 1			2,004,190.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	***************************************	····· A	2/001/2001
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	A STATE OF	
b Other (Describe in Part XIII.)			
		4c	0.
c Add lines 4a and 4b 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			2,004,190.
Part XII Reconciliation of Expenses per Audited Financial			
Complete if the organization answered "Yes" on Form 990, Part IV		gor Hotain	•
Total expenses and losses per audited financial statements			2,352,519.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		300	2,332,313.
a Donated services and use of facilities	2a		
b Prior year adjustments			
c Other losses			
d Other (Describe in Part XIII.)	-		0
e Add lines 2a through 2d			2,352,519.
3 Subtract line 2e from line 1		3	4,352,519.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	A Lat		
a Investment expenses not included on Form 990, Part VIII, line 7b	A		
b Other (Describe in Part XIII.)		100	0
c Add lines 4a and 4b			0.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I. lin	ne 18,)	5	2,352,519.
Part XIII Supplemental Information.			Observe Annexes - convincio
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a		, line 4; Part X	line 2; Part XI,
lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide	e any additional information.		
DADE II TINE 4.			
PART V, LINE 4:			
MILE ENDOUNENM FIND TO DESTRUMED TOO IN			F
THIS ENDOWMENT FUND IS DESIGNATED FOR US	SE IN THE CONDUCT C	F TRAVE	Ъ
TARRIGARDI ERMANATAN AND MENTANDA PROGRAM	-		
INDUSTRY EDUCATION AND TRAINING PROGRAMS	o •		
PART X, LINE 2:			
THE ASSOCIATION HAS ADOPTED THE ACCOUNT:	ING GUIDANCE RELATI	ED TO UN	CERTAIN
TAX POSITIONS, AND HAS EVALUATED ITS TAX	K POSITIONS AND BEI	LIEVES T	HAT ALL
OF THE POSITIONS TAKEN BY THE ASSOCIATION	ON IN ITS FEDERAL A	AND STAT	E EXEMPT
		μ	
ORGANIZATION TAX RETURNS ARE MORE LIKELY	THAN NOT TO BE SU	JSTAINED	UPON
EXAMINATION.			<u> </u>
	*		

Schedule D (Form 990) 2020

Schedule D (Form 990) 2020 C/O COOPER, WHITE & COO	PER, LLP **-**4384	Page 5
Schedule D (Form 990) 2020 C/O COOPER, WHITE & COOPER XIII Supplemental Information (continued)		
(a)		
	· · · · · · · · · · · · · · · · · · ·	
		-
		
	2	
	-	
	3	
	58.1	

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization	AUDT 200	OCTABLOM			Employer identif	ication number
PACIFIC ASIA TR					**-***438	1
Part I General Infor	rmation on A	ctivities Out	side the United States. Compl	laka if klasa sossas	i	4
Form 990, Part IV		ctivities out	side the officed states. Compi	lete if the organ	ization answered "	res on
		maintain recor	ds to substantiate the amount of its gra	ante and other	accietanca	
			he selection criteria used to award the			Yes No
the grantees engionity it	or the grants or a	issistance, and t	the selection criteria used to award the	grants or assis	starice:	Tes INO
2 For grantmakers, Desc	ribe in Part V the	organization's	procedures for monitoring the use of it	c aranta and at	har ansistanaa auta	ida tha
United States.	ande in Fait V trie	organization s	procedures for morntoning the use of it	s grants and ot	rier assistance outs	ide irie
	he following Bort	I line 2 table of	n be duplicated if additional space is r	All Andreas		
(a) Region	(b) Number of	(c) Number of			vity listed in (d)	(f) Total
(a) negion	offices	employees,	(by type) (such as, fundraising, pro-	7000	gram service,	expenditures
	in the region	agents, and independent	gram services, investments, grants to	**COOKERS.************************************	specific type	for and
		contractors	recipients located in the region)	. 400000	(s) in the region	investments in the region
		in the region		1 00111111111	IODG AND	in the region
				1. CONFEREN		
				1000	SOUT ENHANCING	
				The state of the s	MABLE GROWTH,	
ASIA	1	26	PROGRAM SERVICE	VALUE AND C	QUALITY OF	296,591.
				20		
				100		
						35
AMERICA			INVESTMENT			38,710.
	10		A. 9			
EUROPE			INVESTMENT			35,289.
			A			
			M. M. Z			
GULF			INVESTMENT			15.
Approx.		-				
			4			
		As-				
CHINA	1	4	INVESTMENT			184,821.
		400				,
		A A	W.	-		
		EL Y				
ASIA			INVESTMENT			1,746,695.
ADIA			INVESTRENT	-		1,740,033.
				F		
DIGITAG			TARIFECANTANA			
PACIFIC			INVESTMENT			0.
				1		
3 a Subtotal	2	30				2,302,121.
b Total from continuation			以 及是 1000000000000000000000000000000000000			
sheets to Part I	. 0	0				. 0.
c Totals (add lines 3a			NO DE LA CONTRACTOR DE			

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. SEE PART V FOR COLUMN (E) DESCRIPTIONS Schedule F (Form 990) 2020

2,302,121.

and 3b)

PACIFIC ASIA TRAVEL ASSOCIATION C/O COOPER, WHITE & COOPER, LLP

Schedule F (Form 990) 2020 C/O COOPER, WHITE & COOPER, LLP *** 4384

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

Ether rotal number of recipient organizations listed above that are recognized as charifies by the fenegin country, recognized as a tax evempt 500(160) organizations for which the grantee or counse has provided a section 501(163) equivalency letter	1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
					2		4	Western	
50 PC 10 PC							0		
								e .	.92
							41		
A STATE OF THE PARTY OF THE PAR)		, 1			20 E	
1.0				j s					
	1.	f recipient organizations anization by the IRS, or	s listed above that are re for which the grantee o	scognized as charities by the recounsel has provided a sect	foreign country, tion 501(c)(3) equ	recognized as a tax uivalency letter	A 4		

Page 3

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Schedule F (Form 990) 2020 C/O COOPER, WHITE & COOPER, LLP **-**4384

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.

(a) Type of grant or assistance (b) Region	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
					O		
		,	2				
*) ×		-	
						a a	*
	~	4				38	
					σ 1		
					-	4	
		П	100	4.5		- 1	ia i
						Porto	مومو (موه سيمة) ع مانياد طوع

Schedule F (Form 990) 2020 C/O COOPER, WHITE & COOPER, LLP
Part IV Foreign Forms **-***4384 Page 4

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	2-3	0-1-2
	Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may		
	be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and		
	Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a	-	
	U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes,"		
	the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to		
	Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
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		200
	Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes,"		
	the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain		
	Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
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		1
	Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2020

PACIFIC ASIA TRAVEL ASSOCIATION C/O COOPER, WHITE & COOPER, LLP

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Schedule F (Form 990) 2020

Page 5

Schedule F (Form 990) 2020
Part V | Supplementa Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions. PART I, LINE 3, COLUMN (E): REGION: ASIA (E) SPECIFIC TYPES OF SERVICES IN REGION: 1. CONFERENCES AND MEETINGS ABOUT ENHANCING THE SUSTAINABLE GROWTH, VALUE AND QUALITY OF TRAVEL AND TOURISM TO-FROM-AND-WITHIN, THE REGION. 2. PATA ADVENTURE TRAVEL CONFERENCE AND MART 2020 IN KOTA KINABALU, SABAH, MALAYSIA. 3. PATA VIRTUAL PTM 2020 4. PATA WEBINAR.

032075 12-03-20

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2020 Open to Public Inspection

Name of the organization

032211 11-20-20

► Go to www.irs.gov/Form990 for the latest information.
PACIFIC ASIA TRAVEL ASSOCIATION

C/O COOPER, WHITE & COOPER, LLP

Employer identification number ** - * * * 4 3 8 4

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: DEVELOPMENT OF THE TRAVEL AND TOURISM INDUSTRY THROUGHOUT THE PACIFIC ASIA AREA. FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS MEMBERS. FORM 990, PART VI, SECTION A, LINE 7A: THE ORGANIZATION'S MEMBERS APPOINT THE BOARD OF DIRECTORS. FORM 990, PART VI, SECTION A, LINE 7B: THE MEMBERS CAN VOTE ON THE INCOMING BOARD. FORM 990, PART VI, SECTION B, LINE 11B: LINE 11B EXPLANATION - THE AUDIT COMMITTEE SHALL HAVE THE RESPONSIBILITY FOR REVIEWING THE ORGANIZATION'S FORM 990 RETURN(INCLUDING ALL PERTINENT SCHEDULES) BEFORE IT IS FILED WITH THE INTERNAL REVENUE SERVICE. A COPY OF THE FORM 990 IS PROVIDED TO THE AUDIT COMMITTEE, CHIEF EXECUTIVE OFFICER, AND CHIEF FINANCIAL OFFICER FOR REVIEW PRIOR TO THE FILING DEADLINE. IN CONDUCTING THEIR REVIEW OF THE FORM 990, IT IS PREFERRED THAT THE AUDIT COMMITTEE SHALL CONDUCT A TOP-LEVEL OR BIG-PICTURE TYPE OF REVIEW. HOWEVER, IF THE AUDIT COMMITTEE DESIRES OR DEEMS IT NECESSARY TO CONDUCT A MORE DETAILED REVIEW OF THE FORM 990, THEY WILL CONTACT THE PREPARER OF THE FORM LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) 2020

Employer identification number **-***4384

990 TO REQUEST COPIES OF THE RELEVANT DETAILED WORKPAPERS WHICH THEY WOULD LIKE TO REVIEW.

ONCE THE AUDIT COMMITTEE, CEO AND CFO HAVE COMPLETED THEIR INITIAL REVIEW

OF THE FORM 990, A MEETING OR CONFERENCE CALL WILL BE SCHEDULED, IF

NECESSARY, WITH THE TAX PREPARER(REGARDLESS OF WHETHER THE FORM 990 IS

EXTERNALLY OR INTERNALLY PREPARED) TO DISCUSS ANY QUESTIONS, COMMENTS, AND

SUGGESTED REVISIONS IDENTIFIED BY THE AUDIT COMMITTEE.

THE PREPARER WILL MAKE ANY REVISIONS TO THE FORM 990 AS SOON AS POSSIBLE TO ENSURE THAT THE RETURN IS FILED WITH INTERNAL REVENUE SERVICE ON A TIMELY BASIS.

AFTER THE FORM 990 HAS BEEN REVIEWED BY THE AUDIT COMMITTEE AND FILED WITH
THE INTERNAL REVENUE SERVICE, THE AUDIT COMMITTEE WILL MAKE A PRESENTATION
AT THE NEXT FULL BOARD OF DIRECTORS MEETING TO UPDATE THE FULL BOARD
REGARDING ITS REVIEW OF THE FORM 990. DURING THIS MEETING, IT IS NOT
REQUIRED THAT THE AUDIT COMMITTEE REVIEW ALL OF THEIR QUESTIONS, COMMENTS,
AND SUGGESTED REVISIONS; A SUMMARY OF THEIR MORE IMPORTANT POINTS WILL BE
SUFFICIENT.

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

THE POLICY IS DISTRIBUTED TO DIRECTORS, OFFICERS, AND KEY EMPLOYEES, WHO

ARE REQUIRED TO REPORT ANY POTENTIAL CONFLICTS ON AN ANNUAL BASIS.

MANAGEMENT REVIEWS THE REPORTS AND ANY CONFLICT VIOLATIONS WOULD BE

REPORTED TO THE BOARD OF DIRECTORS.

Schedule O (Form 990 or 990-EZ) 2020	Page 2
Name of the organization PACIFIC ASIA TRAVEL ASSOCIATION C/O COOPER, WHITE & COOPER, LLP	Employer identification number **-***4384
THE PROCESS FOR DETERMINING COMPENSATION TO THE ORGANIZAT:	ION'S OTHER
OFFICERS OR KEY EMPLOYEES INCLUDES COMPARABILITY DATA AND	OUTSIDE RESEARCH.
THE COMPENSATION IS REVIEWED AND APPROVED BY THE EXECUTIVE	E BOARD COMMITTEE.
THE PROCESS FOR DETERMINING COMPENSATION TO THE ORGANIZAT	ION'S CEO,
EXECUTIVE DIRECTOR AND OTHER TOP MANAGEMENT OFFICIALS INC	LUDES
COMPARABILITY DATA AND OUTSIDE RESEARCH. THE COMPENSATION	IS REVIEWED AND
APPROVED BY THE EXECUTIVE BOARD COMMITTEE.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION'S GOVERNING DOCUMENTS, POLICIES AND FINA	NCIAL STATEMENTS
ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.	
FORM 990, PART XII, LINE 2C:	
NO CHANGE FROM PRIOR YEAR.	¥ 8
	-
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032212 11-20-20

Schedule O (Form 990 or 990-EZ) 2020

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. ▶ Attach to Form 990. PACIFIC ASIA TRAVEL ASSOCIATION C/O COOPER, WHITE & COOPER, LLP Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990) Part

OMB No. 1545-0047 2020

Open to Public Inspection

Employer identification number **-**4384

Direct controlling entity End-of-year assets (e) Total income (p) Legal domicile (state or foreign country) Primary activity Name, address, and EIN (if applicable) of disregarded entity

Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Ves" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. Part II

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	St. T.	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?
PATA POUNDATION INC ~ 94-2955325				501(c)(3))		Yes No
201 CALIFORNIA ST., # 1450	FURTHER EDU.& TRAINING			LINE 9 ORGANI		
SAN FRANCISCO, CA 94111	PROGS.FOR TOURISM	CALIFORNIA	501(C)(3)	ZATION THAT N PATA	PATA	×
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	6					
		54				

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

Schedule R (Form 990) 2020

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Page 2

PACIFIC ASIA TRAVEL ASSOCIATION C/O COOPER, WHITE & COOPER, LLP

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 Schedule R (Form 990) 2020 Part III

Percentage Yes No ownership (i) Section 512(b)(13) controlled entity? 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. 8 Percentage ownership Yes No General or E amount in box 20 of Schedule K-1 (Form 1065) Code V-UBI Share of end-of-year assets Ξ 6 Disproportionate Yes No allocations? $\widehat{\Xi}$ Share of total income (g) Share of end-of-year assets Type of entity (C corp, S corp, or trust) (e) Share of total income (d)
I Direct controlling | (related, unrelated, excluded from tax under sections 512-514) Predominant income Legal domicile (state or foreign country) (0) (d)

[Direct controlling | entity Primary activity (Q) (c)
Legal
domicile
(state or
foreign
country) organizations treated as a partnership during the tax year. Primary activity (q) Name, address, and EIN of related organization Name, address, and EIN of related organization Part IV

Schedule R (Form 990) 2020

032162 10-28-20

Page 3

Schedule R (Form 990) 2020 C/O COOPER, WHITE & COOPER, LLP

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?	ed organizations listed in Parts	II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			1a	×
b Gift, grant, or capital contribution to related organization(s)			1b	×
c Gift, grant, or capital contribution from related organization(s)		100000000000000000000000000000000000000	10	×
	· · · · · · · · · · · · · · · · · · ·		14	×
			1e	×
f Dividends from related organization(s)			#	×
g Sale of assets to related organization(s)			1g	×
Purchase of assets from related organization(s)			4	×
i Exchange of assets with related organization(s)			=	×
j Lease of facilities, equipment, or other assets to related organization(s)			1	×
k Lease of facilities, equipment, or other assets from related organization(s)			*	×
1 Performance of services or membership or fundraising solicitations for related organization(s)	8		-	×
m Performance of services or membership or fundraising solicitations by related organization(s)			T.	×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			1h	×
Sharing of paid employees with related organization(s)			10	×
Reimbursement paid to related organization(s) for expenses			ot X	
g Reimbursement baid by related organization(s) for expenses			19	×
r Other transfer of cash or property to related organization(s)			+	×
s Other transfer of cash or property from related organization(s)			18	×
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.	line, including covered relations	ships and transaction thresholds.		
(a) (b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	lved	
(1) PATA FOUNDATION, INC.	40,000.FMV			
			20	
(3)				Î
(4)				
(5)				
(9)				
032163 10-28-20		Schedule R (Form 990) 2020	(Form 990) 2020

Page 4

-4384

PACIFIC ASIA TRAVEL ASSOCIATION

C/O COOPER, WHITE & COOPER, LLP Schedule R (Form 990) 2020 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.

(k)	General or Percentage managing ownership ves No									Schedule R (Form 990) 2020
6	General or managing partner? Yes No									R (Form
8	Disproperational Code V-UBI General or Percentage florate amount in box 20 managing ownership of Schedule K-1 partner? or Schedule K-1 yes No (Form 1065) Yes No		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			* # * * * * * * * * * * * * * * * * * *		П		Schedule
(£)	Dispropor- tionate diocations?									
(b)	Share of end-of-year assets	70				-				
	Share of total income									
(e)	e partners sec 501(c)(3) der orgs?								-	
(p)	Predominant income (related, unrelated, excluded from tax under sections 512-514)				1			N N	=	
(c)	Legal domicile (state or foreign country)					1000 St. 100				
(q)	Primary activity		8	e.			U			
(a) (b)	Name, address, and EIN of entity									

PACIFIC ASIA TRAVEL ASSOCIATION **-***4384 Page 5 Schedule R (Form 990) 2020 C/O Part VII Supplemental Information C/O COOPER, WHITE & COOPER, LLP Provide additional information for responses to questions on Schedule R. See instructions.

TAX RETURN FILING INSTRUCTIONS

CALIFORNIA FORM 199

FOR THE YEAR ENDING December 31, 2020

		ensemble statement		
Prepared For	:			1
	Pacific Asia Travel Associat	tion		
	C/O Cooper, White & Cooper			
	201 California St No. 1700	OI, ELI		A.
	San Francisco, CA 94111			
Prepared By:			A	
	RSM US LLP		A CONTRACTOR OF THE PARTY OF TH	
	1555 Palm Beach Lakes Bl	vd. Suita 700	AL.	20
	West Palm Beach, FL 3340			7
	West Fail Deadi, FE 3340	, ,	A STATE OF THE PARTY OF THE PAR	6
				7
To be Signed	and Dated By:			
	Not applicable			
	Not applicable		E A	
Amount of Ta	ax:			
	Total Tax		0	
	Less: payments and credits	\$	0	
	Plus: other amount	\$	<u> </u>	
	Plus: interest and penalties	\$	0	
	No payment is required	\$	U.	
	No payment is required	Φ		
Overpaymen	t:	1		
	Credited to your estimated tax	\$		
	Other amount	9	0	
	Refunded to you	g		
	Troiting to you	Ψ	U	
	- 4	. Do.		
Make Check	Payable To:	AT .		
	Not applicable			
	Not applicable			
Mail Tax Retu	urn and Check (if applicable)	То:		
	This return has qualified for	oloctronic filing	Please review the retur	n for completeness
- *	and accuracy. We will then			
	paper copy of the return to	the FTB.	in ciccionically to the	T TB. Bo not mail the
Return Must	be Mailed On or Before:			
	Not applicable			
	140t applicable			
Special Instr	uctions:	W.	92	

TAXABLE YEAR

California Exempt Organization Annual Information Return

028941	12-22-20
FORM	Λ

199

15 Penalties and Interest. See General Information J 15 00	20	20 Annual Information Return			199	-
PACIFIC ASTA "RAVEL ASSOCIATION C/O COPER, WHITE & COOPER, LLP Simula advects (pulse or room) 201 CALIFORNIA ST, NO. 1700 Call CALIFORNIA ST, NO. 1700 SAN PRANCISCO Foreign previous feeting and selections of the state of the previous feeting and selections of the previous feeting and se	Calendar Ye	ar 2020 or fiscal year beginning (mm/dd/yyyy) , and ending (mm/dd			¥.	_
Content Complete Part Lines and required to file this form. See General Information B and C. Content Conte	PACIF:	C ASIA TRAVEL ASSOCIATION OOPER, WHITE & COOPER, LLP	97914 FEIN	193		-
San PRANCISCO CA 94111 State ZaP-cobe SAN PRANCISCO CA 94111				**4	384	_
Foreign provinces attack convolve years Foreign years Foreig	-		7IP code	A		-
Foreign provincendamic county	and alone and	Control Statement Statement Control Co	Mark Dordriges	1		
Amended return Yes No No RC RC Section 4947(3)(1) trust Yes No No Frieal Information return? Yes No No Frieal Information return Yes No No Frieal Information return Yes No No Frieal Information return Yes No No Frieal Information No No Frieal Information No No No Frieal Information No No No No Frieal Information No No No No No No Frieal Information No No No No No No No				1000	de	-
1 Gross sales or receipts from other sources. From Side 2, Parf II, line 8	B Amend C IRC Se D Final in Enter da E Checke F Federal (4) X G Is this H Is this	return filed? (1) •	structions	he org ns. on 23 mber s ? 09 to	Yes X No Janization	
1 Gross sales or receipts from other sources. From Side 2, Parf II, line 8	Part I	Complete Part Luniess not required to file this form. See General Information B and C.				-
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Receipts and Revenues A				2	- 04	0
This line must be completed. If the result is less than \$50,000, see General Information B This line must be completed. If the result is less than \$50,000, see General Information B Cost of goods sold Cost or other basis, and sales expenses of assets sold Total costs. Add line 5 and line 6 Total cross income. Subtract line 7 from line 4 Total cross and disbursements. From Side 2, Part II, line 18 Total governments. From Side 2, Part II, line 18 Total payments Payments balance. If line 11 is more than line 12, subtract line 9 from line 8 Total growness and disbursements. Subtract line 9 from line 8 Total growness and disbursements. Subtract line 9 from line 8 Total growness and disbursements. Subtract line 9 from line 8 Total growness and disbursements. Subtract line 9 from line 8 Total growness and disbursements. Subtract line 9 from line 8 Total growness and disbursements. Subtract line 9 from line 8 Total growness and disbursements. Subtract line 9 from line 8 Total growness and disbursements. Subtract line 9 from line 8 Total growness and disbursements. Subtract line 9 from line 8 Total growness and disbursements. Subtract line 9 from line 8 Total growness and disbursements. Subtract line 9 from line 8 Total growness and disbursements. Subtract line 9 from line 8 Total growness and disbursements. From Side 2, Part II, line 18 Payments balance. If line 12 is more than line 12, subtract line 12 from line 1 Total payments Total growness and disbursements. From Side 2, Part II, line 18 Payments balance. If line 11 is more than line 12, subtract line 11 from line 1 Total payments Total growness and disbursements. From Side 2, Part II, line 18 Total growness and disbursements. From Side 2, Part II, line 18 Total growness and disbursements. From Side 2, Part II, line 18 Total growness and disbursements. From Side 2, Part II, line 18 Total growness and disbursements. From Side 2, Part II, line 18 Total growness and disbursements. From Side 2, Part II, line 18 Total growness and disb				3	0	0
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Filing Fee 13 Payments balance. If line 11 is more than line 12, subtract line 12 from line 11 14 Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12 15 Penalties and Interest. See General Information J 16 Balance due. Add line 12 and line 15. Then subtract line 11 from the result 16 Under penalties of perjury, I declare that I have expressed this return, including accompanying schedules and statements, and to the best of my knowledge and belief. It is true, correct, and complete. Daclaration of respector (other than taxpayer) is based on all information of which preparer has any knowledge. Paid Preparer's signature Preparer's signature Firm's name (or yours, if self-employed) and address RSM US LLP 1555 PALM BEACH LAKES BLVD., SUITE 700 Telephone **-***4325 Telephone **-***4325 Telephone **-***4325 Telephone **-****4325 Telephone **-****4325 Telephone **-****4325 Telephone **-****4325 Telephone **-****4325 Telephone **-*********************************			•	11	0	0
Filing Fee 14 Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12 15 Penalties and Interest. See General Information J 16 Balance due. Add line 12 and line 15. Then subtract line 11 from the result Under penalties of perjury. I declare that have expressed this return, including accompanying schedules and statements, and to the best of my knowledge and belief. Sign Here Signature Signature Obate CFO Date Check if Signature Obate Obat						
15 Penalties and Interest. See General Information J 16 Balance due. Add line 12 and line 15. Then subtract line 11 from the result Under penalties of perjury. I declare that I have expurished this return, including accompanying schedules and statements, and to the best of my knowledge and belief. Sign Here Signature Signature Officer Signature Preparer's Signature Officer Preparer's Use Only RSM US LLP (or yours, if self-employed) And address RSM US LLP Title O5/26/21 self-employed O5/26/21 self-employed And address RSM US LLP Totelephone **-**4325 Telephone **-***4325 **-***4325 **-***4325 **-***4325 **-***4325 **-****4325 **-*********************************						_
16 Balance due. Add line 12 and line 15. Then subtract line 11 from the result	Filing Fee	14 Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12	•	14		
Title						_
Title		16 Balance due. Add line 12 and line 15. Then subtract line 11 from the result	to the best of m	16	dedge and belief.	0
Preparer's signature 5 105/26/21 Self-employed 5 105/26/21 P01877773 Paid Preparer's Use Only Preparer's Use Only Self-employed 5 105/26/21 Self-employed 5 105/26/21 Self-employed 5 105/26/21 Self-employed 7 105/26/21 Self-em		Signature of officer CFO	Date		• Telephone 415-291-0330	
Preparer's Use Only Preparer's Use Only Preparer's Use Only Preparer's Use Only Preparer's RSM US LLP **_***4325 **_***4325 **_***4325 **_***4325 **_***4325 **_***4325 **_****4325 **_****4325 **_****4325 **_****4325 **_****4325 **_*********************************					10-2001	
Preparer's Use Only Firm's name (or yours, if self-employed) and address Use Only Firm's name (or yours, if self-employed) and address RSM US LLP **-**4325 Telephone 561-697-1785		signature > 05/26/21	self-employed	•		_
Use Only Use Only WEST PALM BEACH LAKES BLVD., SUITE 700 Telephone 561-697-1785						
use Only and address WEST PALM BEACH, FL 33401 561-697-1785	William Street	if self-				_
	Use Only				Control Control Programme	
			• X	Yes		

PACIFIC ASIA TRAVEL ASSOCIATION C/O COOPER, WHITE & COOPER, LLP

2 Interest

-*4384

028951 12-22-20

Part II Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information.

1 Gross sales or receipts from all business activities. See instructions

	3 Dividends				3		00
Receipts	4 Gross rents			•	4		00
from	5 Gross royalties				5		00
Other	6 Gross amount received from sale of				6		00
Sources	7 Other income		SEE STAT	EMENT 1 •	7	1,983,180	00
	8 Total gross sales or receipts from o	other sources. Add line 1 throug	th line 7. Enter here and on	Side 1, Part I, line 1	8	2,004,190	00
	9 Contributions, gifts, grants, and sim				9		00
	10 Disbursements to or for members				10		00
	11 Compensation of officers, directors	and trustees	SEE STAT	EMENT 2	11	1,402,108	3 00
	12 Other salaries and wages	,	*******************************	•	12		00
Expense				AND DESCRIPTION OF THE PERSON	13		00
and	14 Taxes			A007 A007	14		00
anu Disburse				**CONTROL **	15	209,129	
ments	70 1007 1007 (1007) 100 100 100 100 100 100 100 100 100 10				16	34,342	
menta	16 Depreciation and depletion (See ins17 Other expenses and disbursements	11 (10 (10 (10 (10 (10 (10 (10 (10 (10 (SEE STAT	EMENT 3 •	17	706,940	
	18 Total expenses and disbursements.	Add line 9 through line 17 Enf	ter here and on Side 1 Part	I line 9	18	2,352,519	
Sched	dule L Balance Sheet	Beginning of taxa			d of taxable		
Assets	Data Data Data Data Data Data Data Data	(a)	(b)	(c)		(d)	
775 - 275 -	sh		1,182,221			798,4	478
	accounts receivable		194,612			133,9	
	notes receivable		A			-	
	entories		M				
	leral and state government obligations		100				
AD AGAZURAS	estments in other bonds		A TO				
	estments in stock						
		MINE THE RESERVE AS					
ATT TANKER	rtgage loans er investments		The same of				
10 0 0	Depreciable assets	913,473	SAL SHEETS OF	891,3	300	THE SELECTION OF THE SE	1945)474
lu a L	ess accumulated depreciation (812,711)	100,762			95,	562
	nd	SUICE DE VARIAGE	AT .	Santa de Laco			
12 Oth	er assets STMT 4		109,996			102,	854
			1,587,591			1,130,	823
	al assetses and net worth				mer (59)		
	counts payable		70,432			83,	659
	ntributions, gifts, or grants payable		, , , , , ,				
	nds and notes payable	Water And Andrews		Version englishmen			
	rtgages payable						
17 IVIU	ner liabilities STMT 5		750,028			628,	362
10 Car	pital stock or principal fund		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	d-in or capital surplus. Attach reconciliation						
			767,131			418,	802
	tained earnings or income fund tal liabilities and net worth		1,587,591		Market Transport	1,130,	
		r books with income per return				,	
OUTIO		le if the amount on Schedule L,		than \$50,000.			
1 Not	t income per books				[8]		103354
	deral income tax	***	not included in this	POSTURE PROFITE SELECTION OF SERVICE CO.	•		
	cess of capital losses over capital gains		8 Deductions in this				B/\$188
				ne this year			
	ome not recorded on books this year		9 Total, Add line 7 a				
		•	10 Net income per re				3330
						-348,	329
b 101	tal. Add line 1 through line 5	540,52	Jupa act line 9 110		********	2.37	

CA 199 OTH	HER INCOME	STATEMENT 1
DESCRIPTION		AMOUNT
OTHER INCOME		8,774.
MEMBERSHIP		1,363,345.
EVENT REVENUE		271,263.
STATEGIC INTELLIGENCE		98,310.
HUMAN CAPITAL DEVELOPMENT	× A	226,490.
OTHER PROGRAMS		14,998.
TOTAL TO FORM 199, PART II, LINE 7		1,983,180.
100	T DIDUCTOR AND EDUCTOR	от в темперите о
CA 199 COMPENSATION OF OFFICERS	S, DIRECTORS AND TRUSTEES	STATEMENT 2
NAME AND ADDRESS	TITLE AND AVERAGE HRS WORKED/WK	COMPENSATION
SOON-HWA WONG 201 CALIFORNIA ST, NO. 1700	CHAIRMAN 0.50	0.
SAN FRANCISCO, CA 94111		
VIET HAI 201 CALIFORNIA ST, NO. 1700 SAN FRANCISCO, CA 94111	VICE CHAIRMAN 0.50	0.
SUMAN PANDEY 201 CALIFORNIA ST, NO. 1700 SAN FRANCISCO, CA 94111	SECRETARY/TREASURER 0.50	0.
CHRIS BOTTRILL 201 CALIFORNIA ST, NO. 1700 SAN FRANCISCO, CA 94111	PAST CHAIRMAN 0.50	0.
JABED AHMMED 201 CALIFORNIA ST, NO. 1700	BOARD MEMBER 0.50	0.
SAN FRANCISCO, CA 94111		
NEETHIAHNANTHAN ARI RAGAVAN 201 CALIFORNIA ST, NO. 1700 SAN FRANCISCO, CA 94111	BOARD MEMBER 0.50	0.
ANNA AU-YEUNG 201 CALIFORNIA ST, NO. 1700 SAN FRANCISCO, CA 94111	BOARD MEMBER 0.50	0.

PACIFIC ASIA TRAVEL ASSOCIATION C/O COOP	**-***4384
KARUN BUDHRAJA 201 CALIFORNIA ST, NO. 1700 SAN FRANCISCO, CA 94111 BOARD MEMBER 0.50	0.
SHI-CHUNG CHANG 201 CALIFORNIA ST, NO. 1700 SAN FRANCISCO, CA 94111 BOARD MEMBER 0.50	0.
STEPHEN CHANG 201 CALIFORNIA ST, NO. 1700 SAN FRANCISCO, CA 94111 BOARD MEMBER 0.50	0.
JENNIFER CHUN 201 CALIFORNIA ST, NO. 1700 SAN FRANCISCO, CA 94111 BOARD MEMBER 0.50	0.
ROYCE CHWIN 201 CALIFORNIA ST, NO. 1700 SAN FRANCISCO, CA 94111 BOARD MEMBER 0.50	0.
DMITRI COORAY 201 CALIFORNIA ST, NO. 1700 SAN FRANCISCO, CA 94111 BOARD MEMBER 0.50	0.
RAM CHANDRA DASH 201 CALIFORNIA ST, NO. 1700 SAN FRANCISCO, CA 94111 BOARD MEMBER 0.50	0.
ERIC FONG 201 CALIFORNIA ST, NO. 1700 SAN FRANCISCO, CA 94111 BOARD MEMBER 0.50	0.
VINOOP GOEL 201 CALIFORNIA ST, NO. 1700 SAN FRANCISCO, CA 94111 BOARD MEMBER 0.50	0.
CARL GUTIERREZ 201 CALIFORNIA ST, NO. 1700 SAN FRANCISCO, CA 94111 BOARD MEMBER 0.50	0.
ZOE HIBBERT 201 CALIFORNIA ST, NO. 1700 SAN FRANCISCO, CA 94111 BOARD MEMBER 0.50	0.
JIRAPON HIRUNRAT 201 CALIFORNIA ST, NO. 1700 SAN FRANCISCO, CA 94111 BOARD MEMBER 0.50	0.

PACIFIC ASIA TRAVE	L ASSOCIATION C/O CO	OP		**-***4384
ELLY HUTABARAT 201 CALIFORNIA ST, SAN FRANCISCO, CA	NO. 1700 94111	BOARD	MEMBER 0.50	0.
OLIVIER JAGER 201 CALIFORNIA ST, SAN FRANCISCO, CA		BOARD	MEMBER 0.50	0.
YOUHYUN JANG 201 CALIFORNIA ST, SAN FRANCISCO, CA		BOARD	MEMBER 0.50	0.
JEREMY JAUNCEY 201 CALIFORNIA ST, SAN FRANCISCO, CA	NO. 1700 94111	BOARD	MEMBER 0.50	0.
RIKA JEAN-FRANCOIS 201 CALIFORNIA ST, SAN FRANCISCO, CA	NO. 1700	BOARD	MEMBER 0.50	0.
ANDREW JONES 201 CALIFORNIA ST, SAN FRANCISCO, CA		BOARD	MEMBER 0.50	0.
NOND KALINTA 201 CALIFORNIA ST, SAN FRANCISCO, CA		BOARD	MEMBER 0.50	0.
ATHIKUN KONGMEE 201 CALIFORNIA ST, SAN FRANCISCO, CA		BOARD	MEMBER 0.50	0.
BENJAMIN LIAO 201 CALIFORNIA ST, SAN FRANCISCO, CA		BOARD	MEMBER 0.50	0.
JETRO NICOLAS F. L 201 CALIFORNIA ST, SAN FRANCISCO, CA	NO. 1700	BOARD	MEMBER 0.50	0.
MARK MANGLONA 201 CALIFORNIA ST, SAN FRANCISCO, CA	NO. 1700 94111	BOARD	MEMBER 0.50	0.
OLIVER MARTIN 201 CALIFORNIA ST, SAN FRANCISCO, CA		BOARI	0.50	0.

PACIFIC ASIA TRAVEL ASSOCIATION C/O COOP	**-***4384
ABDULLA MAUSOOM 201 CALIFORNIA ST, NO. 1700 SAN FRANCISCO, CA 94111 BOARD MEMBER 0.50	0.
MARY WAN MERING 201 CALIFORNIA ST, NO. 1700 SAN FRANCISCO, CA 94111 BOARD MEMBER 0.50	0.
AL MERSCHEN 201 CALIFORNIA ST, NO. 1700 SAN FRANCISCO, CA 94111 BOARD MEMBER 0.50	0.
ANNA MOLANDER-BRY 201 CALIFORNIA ST, NO. 1700 SAN FRANCISCO, CA 94111 BOARD MEMBER 0.50	0.
BEN MONTGOMERY 201 CALIFORNIA ST, NO. 1700 SAN FRANCISCO, CA 94111 BOARD MEMBER 0.50	0.
NGUYEN NGOC HOAI NGUYEN 201 CALIFORNIA ST, NO. 1700 SAN FRANCISCO, CA 94111 BOARD MEMBER 0.50	0.
BILL OBREITER 201 CALIFORNIA ST, NO. 1700 SAN FRANCISCO, CA 94111 BOARD MEMBER 0.50	0.
HENRY OH, JR. 201 CALIFORNIA ST, NO. 1700 SAN FRANCISCO, CA 94111 BOARD MEMBER 0.50	0.
NOREDAH OTHMAN 201 CALIFORNIA ST, NO. 1700 SAN FRANCISCO, CA 94111 BOARD MEMBER 0.50	0.
ASITHA PANABOKKE 201 CALIFORNIA ST, NO. 1700 SAN FRANCISCO, CA 94111 BOARD MEMBER 0.50	0.
MAYUR PATEL BOARD MEMBER 201 CALIFORNIA ST, NO. 1700 SAN FRANCISCO, CA 94111	0.
RAKI PHILLIPS 201 CALIFORNIA ST, NO. 1700 SAN FRANCISCO, CA 94111 BOARD MEMBER 0.50	0.

PACIFIC ASIA TRAVEL	L ASSOCIATION C/O	COOP	**-***4384
ATTHAWET PROUGESTAN 201 CALIFORNIA ST, SAN FRANCISCO, CA	NO. 1700	BOARD MEMBER 0.50	0.
JOHN QUINATA 201 CALIFORNIA ST, SAN FRANCISCO, CA	NO. 1700 94111	BOARD MEMBER 0.50	0.
TAUFIQ RAHMAN 201 CALIFORNIA ST, SAN FRANCISCO, CA	NO. 1700 94111	BOARD MEMBER 0.50	0.
G. KAMALA RAO, IAS 201 CALIFORNIA ST, SAN FRANCISCO, CA	NO. 1700	BOARD MEMBER 0.50	0.
DHANANJAY REGMI 201 CALIFORNIA ST, SAN FRANCISCO, CA		BOARD MEMBER 0.50	0.
MOHAMED SALLAUDDIN 201 CALIFORNIA ST, SAN FRANCISCO, CA	NO. 1700	BOARD MEMBER 0.50	0.
SANJEET 201 CALIFORNIA ST, SAN FRANCISCO, CA		BOARD MEMBER 0.50	0.
PETER SEMONE 201 CALIFORNIA ST, SAN FRANCISCO, CA	NO. 1700 94111	BOARD MEMBER 0.50	0.
JAE-PIL SHO 201 CALIFORNIA ST, SAN FRANCISCO, CA		BOARD MEMBER 0.50	0.
LENNA SHULGA 201 CALIFORNIA ST, SAN FRANCISCO, CA		BOARD MEMBER 0.50	0.
ARVIND SINGH 201 CALIFORNIA ST, SAN FRANCISCO, CA		BOARD MEMBER 0.50	0.
KAMIKA SMITH 201 CALIFORNIA ST, SAN FRANCISCO, CA		BOARD MEMBER 0.50	0.

PACIFIC ASIA TRAVE	L ASSOCIATION C/O C	OOP	**-***4384
WENDY SOWERS 201 CALIFORNIA ST, SAN FRANCISCO, CA		BOARD MEMBER 0.50	0.
FAAMATUAINE LENATA 201 CALIFORNIA ST, SAN FRANCISCO, CA	NO. 1700	BOARD MEMBER 0.50	0.
YUTHASAK SUPASORN 201 CALIFORNIA ST, SAN FRANCISCO, CA		BOARD MEMBER 0.50	0.
JATINDER TANEJA 201 CALIFORNIA ST, SAN FRANCISCO, CA		BOARD MEMBER 0.50	0.
DIMUTHU TENNAKOON 201 CALIFORNIA ST, SAN FRANCISCO, CA		BOARD MEMBER 0.50	0.
BIBHUTI CHAND THAK 201 CALIFORNIA ST, SAN FRANCISCO, CA	NO. 1700	BOARD MEMBER 0.50	0.
RATHASAK THONG 201 CALIFORNIA ST, SAN FRANCISCO, CA		BOARD MEMBER 0.50	0.
JUDY TORRES 201 CALIFORNIA ST, SAN FRANCISCO, CA		BOARD MEMBER 0.50	0.
FANNY VONG 201 CALIFORNIA ST, SAN FRANCISCO, CA		BOARD MEMBER 0.50	0.
KHIN THAN WIN 201 CALIFORNIA ST, SAN FRANCISCO, CA		BOARD MEMBER 0.50	0.
MUSA YUSOF 201 CALIFORNIA ST, SAN FRANCISCO, CA		BOARD MEMBER 0.50	0.
TOTAL TO FORM 199,	PART II, LINE 11		0.

CA 199	OTHER EXPENSES		STATEMENT 3
DESCRIPTION			AMOUNT
DIRECT EXPENSES			296,591.
PROFESSIONAL FEES			149,915.
GENERAL & ADMIN. EXP.			88,277.
EDP COST			87,680.
OTHER EMPLOYEE BENEFITS		. X.	50,397.
TRAVEL			32,436.
ALL OTHER EXPENSES			1,644.
TOTAL TO FORM 199, PART II, LINE	17		706,940.
CA 199	OTHER ASSETS		STATEMENT 4
(A)	¥		
DESCRIPTION		BEG. OF YEAR	END OF YEAR
PREPAID EXPENSES AND DEFERRED CHA	RGES	109,996.	102,854.
TOTAL TO FORM 199, SCHEDULE L, LI	NE 12	109,996.	102,854.
		*	
CA 199 O	THER LIABILITIE	S	STATEMENT 5
	1		X
DESCRIPTION		BEG. OF YEAR	END OF YEAR
MEMBERSHIP DUES PAID IN ADVANCE		406,343.	271,083.
PROVISION FOR EMPLOYEE BENEFIT	P.A.	304,322.	240,965.
DEFERRED REVENUE	40	39,363.	116,314.
TOTAL TO FORM 199, SCHEDULE L, LI	NE 18	750,028.	628,362.
			9
CA 199	FUND BALANCES		STATEMENT 6
DESCRIPTION		BEG. OF YEAR	END OF YEAR
NET ASSETS WITHOUT DONOR RESTRICT	IONS	767,131.	418,802.
TOTAL TO FORM 199, SCHEDULE L, LI	NE 21	767,131.	418,802.

_	_	_

Date Accepted

DO NOT MAIL THIS FORM TO THE FTB

TAXABL 20	E YE.	– Ca			Returr	Autho	rizati	on fo	or				8453-EO
Exempt Or	ganizati		- Inpt C	Ji gaiii.	Lations						1 16	dentifying n	umber
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C/O				COOPER							Ι,	**_**	**4384
	-												4304
Part I		ctronic Return						-					2,004,190
		ss receipts (Fo			•••••							\ <u>'</u> -	2,004,190
		oss income (For			line Ol							2-	2,352,519
3 To	tai ex	penses and dist	Jursements	(ronn 199,	iine 9)		************					3-	2,332,313
Part II	Set	tle Your Accou	ınt Electro	nically for T	avable Vear	2020					ASSESSED		,
4	7	ctronic funds w		4a Amo		2020		4b Wit	hdrawal c	late (mn	n/dd/vv	(V)	
Part III		nking Informat				rganization's	banking ir			4	All		
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		number					7 T	pe of ac	count:	Ch	ecking		Savings
Part IV		claration of Off	ficer					9)	100	. 18			*
I authoriz				to be settled	as designated	in Part II. If I c	heck Part I	I, Box 4, I	authorize.	an electri	onic func	is withdra	awal for the amount listed
statemer delayed, Sign Here	nts be in auth	ransmitted to the orize the FTB to Signature of officer	FTB by the Edisclose to the	RO, transmit	ator (ERO) a	diate service pr vice provider t 12021 nd Paid Prep	CFO	he proces	ssing of the	exempt	organiz	ation's re	
am only accurated provided 1345, 20 the exem I declare	an inte ly refle the or 20 Ha apt org that I	ermediate service cts the data on the ganization officer ndbook for Autho anization return is	provider, I un le return.) I he with a copy rized e-file Pr s filed, which le above exer	nderstand tha ave obtained of all forms a roviders. I wil ever is later, opt organizat	t I am not resp the organization nd information I keep form FT and I will make ion's return an	onsible for rev on officer's sign of that I will file B 8453-EO on a copy availab d accompanyin	lewing the lature on fo with the FT file for fou le to the FT g schedule	exempt or orm FTB 8 B, and I h r years from B upon ross and sta	rganization 453-EO be ave followe om the due equest. If I	's return. fore trans ed all othe date of t am also	I declare smitting er require the reture the paid	e, howeve this retur ements d or four preparer,	est of my knowledge. (If I er, that form FTB 8453-EO in to the FTB; I have escribed in FTB Pub. years from the date under penalties of perjury, edge and belief, they are
	ERO'	s- k			.)))		Date		Check if		Check	1	ERO's PTIN
ERO	signa		US LL	P	December 1				also paid preparer		if self- employe	d 🔲	
Must		s name (or yours		US LLI		39	11.10					Firm's FE	N**-***4325
Sign		-employed) ddress				LAKES I	BLVD.	, SU	ITE 7	0			
			WEST	PALM	BEACH,	FL						ZIP code	33401-2348
		s of perjury, I dec									ements,	and to th	e best of my knowledge
Paid		Paid)	Date		Check		I Paid	preparer's PTIN
Prepa	rer	preparer's signature						- Court	Ti.	if self-	ed	West = 1/1/2	P01877773
Must		Firm's name (or you	ırs N P C	M US I	J.P					- on proye	-		IN **-***4325
Sign		if self-employed) and address				H LAKES	BLV	D	SUITE	700		, imarc	1020
2.9.1		und douitss			LM BEAC			, ,		. 0 0		ZIP code	33401
			112										