Form 990

(Rev. January 2020)

Department of the Treasury

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047 2019

Open to Public Inspection

A	For the	2019 calendar y	ear, or tax year t	eginning	08-	01 , 2019, a	and endin	g	07	-31 ,2020
В	Check If ap	oplicable:	C Name of organiza	lorU.S. CHESS CEN	TER			a	Emplo	oyer identification number
_	Address ch	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(in the contract of the contra							52-1758423
_	Name char	1000	The state of the s							none number
=	Initial return	-								
=		n/terminated		or province, country, and ZIP of	r foreign postal code		1	G	Gross	receipts
=	Amended r	widowing Maliber	Washington,	111일 전 11일 시간 11일 11일 11일 11일 11일 11일 11일 11일 11일 11					s	226,102
=	Application		F Name and addres					H(a) is this a grou	ap return fo	
_		periong	,	a. Mr. government.	-			H(b) Are all sub		
	Tax-exemp	ot status: X 501((c)(3) 501(c) () (insert no.)	4947(a)(1) or	527				t. (see instructions)
	Website:		nessctr.org			48614		H(c) Group ex	emption	number >
_		ganization: X Corp		Association Other		L Year of format	12000			al domicile: DC
_	rt I	Summary								
No.	the same of the sa		he organization's	mission or most signific	ant activities: The	U.S. Che	ess Cen	ter tead	ches	chess to
		and the state of t	THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.	a means of impr	and the state of t	The second secon				
90		CHILDEON GI								
Activities & Governance										
Ver	2	Check this hov	☐ if the organi	zation discontinued its o	perations or disposed	of more than	25% of its	s net assets.		
8				governing body (Part V					3	7
∞				mbers of the governing					4	6
ties	C. Control			yed in calendar year 201					5	10
\$	1023		volunteers (estima						6	12
ĕ				from Part VIII, column (7a	0
	UNE TEN			come from Form 990-T,	즐겁게 내려왔습니다. 이 그리가 없이다. 하기를				7b	0
_	- 5	1461 Ullifelated Du	ialiticas taxable ili	come nour and occ 1,			· · · · ·	Prior Year		Current Year
	8	Contributions and	d grante (Part VIII	l line 1h)					500	71,015
Φ	. 1150/15 6	Contributions and grants (Part VIII, line 1h)							634	152,690
90	1 1 1 1 1 1 1 1 1 1	Investment income (Part VIII, column (A), lines 3, 4, and 7d)						275	1,724	
Revenue	190.00		ther revenue (Part VIII, column (A), lines 5, 44, and 70)						210	673
	1777			n 11 (must equal Part VI				291,	409	226,102
								2021	403	0
	73353		nts and similar amounts paid (Part IX, column (A), lines 1-3)							0
			to or for members (Part IX, column (A), line 4)					174,159		165,827
88	1000							1/4/	133	105,027
Expenses	100,000					0		A RELIGIOUS		
×				X, column (D), line 25)				61	702	27,336
ш	0 1002			(A), lines 11a-11d, 11f-2			•	61,783		193,163
	0.000		유명하다 하는 명기를 모으면 되었다.	(must equal Part IX, colu			.	235,942 55,467		32,939
-	-	Revenue less ex	penses. Subtrac	t line 18 from line 12 .					C. C	End of Year
Net Assets or	20	Total counts (D-	et V. Boo 461				pegin	ning of Current 203,		236,632
95	20	Total assets (Pa					*	203,	033	236,632
let A	21	Total liabilities (Part X, line 26)						203,	603	236,632
_	1			aractime 21 nontime 20	,			203,	093	230,032
	art II	Signature I		his return, including accompany	ing schedules and statemen	nts, and to the bes	et of my know	ledge and belief	itis	
true	, correct, a	ind complete. Declarat	ion of preparer (other	han officer) is based on all info	mation of which preparer ha	is any knowledge.				
			-							
Sig	ın l	Signature of c	opher P McC	leary					Dat	le :
200	1200				. Binaskan					
He	re		name and title	leary, Executive	Director	_				
-		Print/Type preparer	Annual Control of the	Preparer's signature		Date		low F	X ir	PTIN
р-	14				PROMESTOR AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE		021		Villa I	
Pa				MANUERNANDO A I		OD 1-01-20	10.5	self-empk	yea	P01209463
	eparer			A INTERNATIONAL				rm's EIN ►		
US	e Only	Firm's address		Wisconsin Ave			Pf	none no.	202	262-0266
_				y Chase MD 2081					202-	262-8266 Yes X No
				rer shown above? (see						
For	Paperw	ork Reduction A	ACI NOUCE, See t	he separate instruction	15.					Form 990 (2019)

	1990 (2019) U.S. CHESS CENTER 52-1738423 Fage 2
Pa	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
•	The U.S. Chess Center teaches chess to children and teens as a means of improving their academic
	and social skills
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by
4	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$168,916 including grants of \$) (Revenue \$156,690)
	The U.S. Chess Center has an educational program to teach chess to children and teens at the
	District of Columbia Public Schools and at every neighborhood of the city, as well as at suburbs and private schools within the Washington, D.C., area. Also, the organization has an educational
	program in place, through offering and conducting summer camps to teach chess to children and
	teens. Also, the organization has an educational program consisting of holding chass tournaments
	aimed at motivating teems and children to learn the game of chess
	<u> </u>
	(Code:) {Expenses \$ including grants of \$) {Revenue \$)
-	(1000a) (Expenses 4)
4c	(Code:) (Expenses \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) {Revenue \$)
40	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses > 168,916
	LAND BLACK AND

Form 990 (2019) U.S. CHESS CENTER 52-1758423
Part IV Checklist of Required Schedules

			Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part J	3	i	x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
_	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Pert I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Pari II	7	1	x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
_	complete Schedule D. Pari III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
•	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or] [:	
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9	1	x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		5.00g	- (i v.)
••	VII, VIII, IX, or X as applicable.	43.5		V
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? # "Yes,"			
•	complete Schedule D, Part VI	1ta		x
h	Did the organization report an emount for investments - other securities in Part X, line 12, that is 5% or more	1.0		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	116		х
	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more	, , , <u>, , , , , , , , , , , , , , , , </u>		
-	of its total assets reported in Part X, line 16? If "Ves," complete Schedule D, Part VIII	1tc		x
	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 167 if "Yes," complete Schedule D, Part IX	11d	i l	x
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		x
•	-	1 100		_
٠,	Did the organization's experate or consulidated 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, Pert X	11f		x
40-	· · · · · · · · · · · · · · · · · · ·	***		
72 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	44-		
	Schedule D, Parts XI and XII	125		<u> </u>
b	· · · · · · · · · · · · · · · · · · ·	4.44		v
40	"Yes," and if the organization answered "No" to line 12s, then completing Schedule D, Perts XI and XII is optional	12b	\vdash	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization matrixin an office, employees, or agents outside of the United States?	14a		X
Þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,		j	
	fundraising, business, investment, and program service activities outside the United States, or aggregate	,,,,,,		
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts / and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
4.5	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	\vdash	X
16	Oid the organization report on Parl 1X, column (A), fine 3, more than \$5,000 of aggregate grants or other	4.4		
	assistance to or for foreign individuate? If "Yes," complete Schedule F, Parts III and IV	16	\vdash	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	,		
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Х
18	Old the organization report more than \$15,000 total of fundraising event gross income and contributions on	4.		
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Parl III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	\vdash	ж
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20ь	\vdash	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			l
	domestic government on Part IX, column (A), line 17 if "Yes," complete Schedule I, Parts I and II	21	لبسا	X

Par	tiv: Checklist of Required Schedules (continued)	_	
		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		i
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	2	X
23	Did the organization enswer "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	j	ļ
	employees? If "Yes," complete Schedule J	3	X
24a	Did the organization have a tex-exempt bond issue with an outstanding principal amount of more than		
	\$100,000 as of the lest day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b		
	through 24d and complete Schedule K. If "No," go to line 25a	a	x
Ð	Did the organization invest any proceeds of tax-exempt bonds bayond a temporary period exception?	b	<u> </u>
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year		į
	to defease any tax-exempt bonds?	c	$oxed{oxed}$
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	d	Ĺ
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit		1
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	ia i	x
ь	is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior		
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	1	
	If "Yes," complete Schedule L, Part L	ъl	x
28	Old the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current		1
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	1	i
	controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part II	s I	l x
-	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key	`\	 ~
27	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee		-
	• • • •		
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these	.	
	persons? If "Yes," complete Schedule L, Pert III	72. 20 A.D.A	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part		.
	IV instructions, for applicable filling thresholds, conditions, and exceptions):		<u></u> ∤:41 %
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If		
	*Yes," complete Schedule L, Part IV	_	X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Parl IV	b	X
¢	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If		
	"Yes," complete Schedule L, Part IV	c .	x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	9	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	i	
	conservation contributions? If "Yes," complete Schedule M	0	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. Part I	<u> </u>	x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? # "Yes,"		
	complete Schedule N, Part II	2	X
33	Did the organization own 190% of an entity disregarded as separate from the organization under Regulations		T
	sections 301.7701-2 and 301.7701-3? // "Yes," complete Schedule R, Part L	3	x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,		T-
	or IV, and Part V, line 1	4	x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	_	X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a		1
·	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	u _b	x
20	Section 501(a)(3) organizations. Did the organization make any transfers to an exempt non-charitable	-	
36	related organization?if "Yes," complete Schedule R, Part V, line 2	۹	Į,
		*	ļ
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	. 1	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	•	X.
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		
100	To , states di , e ett.	8 X	Щ
Par	Statements Regarding Other IRS Filings and Tax Compliance		
	Check if Schedule O contains a response or note to any line in this Part V		┸
		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		1: "
b		X WX	1
c	Did the organization comply with backup withholding rules for reportable payments to vendors and	BIRC:	
	reportable gaming (gambling) winnings to prize winners?	<u> </u>	

Form	990 (2019) U.S. CHESS CENTER	52-175842	23	P	age !
Par	f V Statements Regarding Other IRS Filings and Tax Compliance (continued)		<u> </u>		
]	Yes	No
29	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax]		ŲŅ.	
	Statements, filed for the calendar year ending with or within the year covered by this return				
ь	If at least one is reported on line Za, did the organization file all required federal employment tax returns?		<u>25 </u>	X	L
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				114.13
3a	Did the organization have unrelated business gross income of \$1,000 or more duting the year?	[3a [x
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O		3b		
4e	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,	ļ	Ì		l
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	[49		Y
b	If "Yes," enter the name of the foreign country	h	923		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		×
C	If "Yes" to line 5a or 5b, did the organization file Form 6686-₹2		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	Ī			
	organization solicit any contributions that were not tax deductible as charitable contributions?		ва		х
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or		\neg		
_	gifts were not tex deductible?		6ъ		1
7	Organizations that may receive deductible contributions under section 179(c).			1374	100
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	į:	20.		7 04 V
•	and services provided to the payor?		7a		х
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		76		
c	Did the organization self, exchange, or otherwise dispose of tangible personal property for which it was				$\overline{}$
•	required to file Form 82822		7e		x
	If "Yes," indicate the number of Forms 8282 filed during the year.			< 30 M	
d	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7 e		X
4	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		x
f	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as requi		7g		x
g			7h		x
h	if the organization received a contribution of cars, boats; airplanes, or other vehicles, did the organization file a Form 1098-C?	* • • • • • • •	*n:]	odily.	
8	Sponsoring organizations maintaining donor advised funds, Did a donor advised fund maintained by the			: '	1000
_	sponsoring organization have excess trusiness holdings at any time during the year?		8		X
9	Sponeoring organizations maintaining donor advised funds.	ľ		20,792	्
a	Did the sponsoring organization make any taxable distributions under section 4966?		9a		X
ъ	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	• • • • • • • • • •	9Ь		X
10	Section 501(c)(7) organizations. Enter:	1			
a	Initialion fees and capital contributions included on Part VIII, fine 12	 			69.
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	 ,			35
11	Section 501(c)(12) organizations. Enter:				
8	Gross income from members or shareholders	 	/5°/		146
ь	Gross income from other sources (Do not net amounts due or paid to other sources	į į			100
	egainst amounts due or received from them.)	:	* ? . ;		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in fleu of Form 1041?	,	12a	7: :::-	1.35
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<u> </u>			. / V.
13.	Section 501(c)(29) qualified nonprofit health insurance issuers.	ŀ	200	Mary.	100
a	is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note: See the instructions for additional information the organization must report on Schedule O.	. 1	30.3		
b	Enter the amount of reserves the organization is required to maintain by the states in which]			
	the organization is licensed to issue qualified health plans		્?∤		
c	Enter the amount of reserves on hand				7,52
1 4 e	Old the organization receive any payments for indoor tarning services during the tax year?		142		x
ь	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	Γ			1
	excess parachute payment(s) during the year?		15		x
	If "Yes," see instructions and file Form 4720, Schedule N.	Ī	747 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		5.4
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.	F	100	S. 7	

Part VI Governance, Management, and Dischosure 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 in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management 1a Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or If the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 16 Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 any other officer, director, trustee, or key employee? x 3 Did the organization delegate control over management duties customarity performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? x Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X Did the organization become aware during the year of a significant diversion of the organization's assets? x 5 6 Did the organization have members or stockholders? X 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? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? x Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? x Each committee with authority to act on behalf of the governing body? is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a Did the organization have local chapters, branches, or affiliates? x 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 Did the organization have a written whisteblower policy? X 14 Did the organization have a written document retention and destruction policy? x Did the process for determining compensation of the following persons include a review and approval by independant persons, comperability deta, and contemporaneous substantiation of the deliberation and decision? 15a Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement. with a taxable entity during the year? 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 List the states with which a copy of this Form 990 is required to be filled District of Columbia 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. Upon request Another's website ☐ Other (explain on Schedule O) ○wn website 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. 20 State the name, address, and telephone number of the person who possesses the organization's books and records

Form 990 (2019)	11.S	CHI

ess center 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.

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

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

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

Check this box if neither the organization nor any rela	ted organizat	tion co	mper	nsate	s be	пу сил	rent	officer, director, or	trustee.	
(A) Name and title	(B) Average hours per week (fixt any hours for seleted organizations below dotted line)	box	, unies per ans	Pos ecia ne es per t a dir	son k	has one s both at his both at employee	·	(C) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount, of other corepensation from the organization and related organizations
(i) Mark Rotenberg, Individual Chairman of the Board		x						0	0	0
(2) Derrick Cogburn, Individual Nember of the Board		T.			:			0	0	0
(3) Akshay Indusekar, Individual Segretary		x					:	0		
(4) Leonard Haynes, Individual Number of the Board		x						0	0	0
(5) Dr Pablo Molina, Individual Number of the Board		x						0	0	0
(6) Anthony Priest, Individual Member of the Board		x		_				0	0	0
(7) David Mehler, Officer Founder and President (8)	40.00		-	x				30,000	0_	0
[10]						_			•	
(11)								•		<u> </u>
112)					7					
(13)										
(14)										

Comparison Com	(F) imeted amount of other compensation from the janization and ed organization
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[19] [20] [21] [22] [23] [24] [25] [26] [27] [28] [29] [29] [29] [29] [20] [20] [20] [20] [21] [22] [23] [24] [25] [26] [27] [28] [28] [29] [29] [29] [20] [20] [20] [20] [21] [22] [22] [23] [24] [25] [26] [27] [28] [29] [29] [29] [20] [20] [20] [20] [20] [21] [22] [22] [23] [24] [25] [26] [27] [28] [29] [29] [29] [29] [20] [20] [20] [20] [20] [20] [20] [20	
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(20) (21) (22) (23) (24) (25) (25) (26) (27)	<u> </u>
(22) (23) (24) (25) 1b Subtotal c Total from continuation sheets to Part VIII, Section A d Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation time the organization 3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or Individual	
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24 25	
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Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization. ▶ 3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual. 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual. 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or Individual.	
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organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	<u> </u>
individual	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual	×
	6 1.8. SK
for services rendered to the organization? If "Yes," complete Schedule J for such person	x
Section B. Independent Contractors	
1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of	
compensation from the organization. Report compensation for the catendar year ending with or within the organization's tax year.	
(A) (E) (C) Name and business address Description of services Compo	
Presente anne assertanne desent univer	EASTVIII
	ann - avenderwe
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶	enter programme

Check if Schedule O contains a response on note to any time in the Part VIII 16 Folderstand compatigues 1	Part '	VIB	Statement of Revenue					
The Control of Contr		• • •	Check if Schedule O contains a response	e or note to any line in th	(A)	Related or exempt	Unrelated	Revenue excluded
b Membership dues		ا ا	5-dt-d	a- 1	riorda elegad	amidia negli di eesa 2	in in Skriifein	sections 512–514
The contributions reported on the contributions of		1 -		-				
Total, Add lines 1s-1f	s, Giffs, Granta nilar Amounts	. –						
Total, Add lines 1s-1f		Ι.	-					
Total, Add lines 1s-1f	\$ ₹							
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Total, Add lines 1s-1f	25	} ¯	· · · · · · · · · · · · · · · ·	ff 68.157				W. 1260 P. C.
Total, Add lines 1s-1f	ě	9		-				
Total, Add lines 1s-1f	1 P	-	lines 1a-1f	1g \$				
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The state of any state of the s]		Business Code		100 200 4 78 20		
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7a Gross amount from soles of assets other than inventory b Less: cost or other basis and sales expenses . 7b . 7c							2 X 1 C C 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A CONTRACTOR A
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and sales expenses		Ι.	other than inventory					5 10 25 160
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8a Gross income from fundraising events (not including \$ of contributions reported on line (c). See Part IV, fine 18	•		· · · · · · · · · · · · · · · · ·	>		1		
of contributions reported on line 1c). See Part IV, \$\text{ine 18} \\ \text{income or (loss) from fundralsing events} \\ \text{c Net income or (loss) from fundralsing events} \\ \text{9a} \text{Gross income from garning} \\ \text{activities, See Part IV, line 19} \\ \text{b Less: direct expenses} \\ \text{c Net income or (loss) from gerning activities} \\ \text{10a} \\ \text{b Less: cost of goods sold} \\ \text{c Net income or (loss) from sales of inventory, less returns and altowances} \\ \text{10a} \\ \text{b Less: cost of goods sold} \\ \text{c Net income or (loss) from sales of inventory} \\ \text{c} \\ \text{d All other revenue} \\ \text{e Total. Add lines 11a-11d} \\ \text{b 673}	Þ	8a	Gross income from fundraising					
1c). See Part IV, fine 18	8		events (not including \$			kati Saiki		
b Less: direct expenses c Net income or (loss) from fundralsing events a Gross income from garning activities, See Part IV, line 19 b Less: direct expenses c Net income or (loss) from garning activities 10a Gross sales of inventory, less returns and altowances b Less: cost of goods sold c Net income or (loss) from sales of inventory b Less: cost of goods sold c Net income or (loss) from sales of inventory c Net income 11a Other income 11a Other income 11a Other income 11b Other income 11d Other income 11			of contributions reported on line	11				
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10a 10a 10b 10b 10a 10b 10a 10b 10a			•		W2.40% (#4.%)	RELATE DESCRIPTION	<u> </u>	4.4, av 3,650 (g)
returns and altowances		l		· · · · · · · · · · · · · · · · · · ·	E. Assessible in the	. 201. 30 19 10 10 14 7	12.02.00 mg/s 185	. Hillian Oleha iki ya
b Less: cost of goods sold		10a		[m]				
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b c d All other revenue	40	110	Other income		6.00 + 0.00 + 0.00 (0.00) 600	277.1.7.1 M 8.3. 3		1 × 7 (148 (476 - 176)
e Total. Add lines 11a-11d	오늘	Ι.	A. Annual des Springer March Springer March		0/3	913	:	
e Total. Add lines 11a-11d	35	I -	-		<u> </u>			
e Total. Add lines 11a-11d	8 <u>6</u>	_	All other revenue	_				
	*				673		Tiyle Gigser	117,3750-1512235.
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	990 (2019) U.S. CHESS CENTER			52-175	8423 Page 10
	t IX Statement of Functional Expenses				
Sech	on 501(c)(3) and 501(c)(4) organizations must complete all o				
	Check if Schedule O contains a response or note to	Any lime in this Part IX	(B)	(C)	
	ot include amounts reported on lines 6b, 7b,	Total expenses	Program service	Menagement and	Fundraising
80, 9	b, and 10b of Part VIII. Grants and other assistance to domestic organizations		expenses	general expenses	expenses
1	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22	İ			
3	Grants and other assistance to foreign				
•	organizations, foreign governments, and				KAN BURNAN
	foreign individuats. See Part IV, lines 15 and 16	•			
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	32,900	29,610	3,290	
6	Compensation not included above, to disqualified	·			
	persons (as defined under section 4958(f)(1)) and			İ	
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	116,176	116,176		
8	Pension plan accruais and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	3,434			
10	Payroll taxes	13,317	11,985	1,332	<u> </u>
11	Fees for services (nonemployees):	`			
a	Management ,		····		
ь	Legel				
¢	Accounting	5,965		5,965	·
ä	Lobbying				<u> </u>
e	Professional fundraising services, See Part IV, line 17		10 12 12 12 13 14 14 15 15 15 15 15 15 15 15 15 15 15 15 15		
ī	Other, (If fine 11g amount exceeds 10% of fine 25, column		<u> </u>		·
9	(A) amount, list line 11g expenses on Schedule O.)			i	
12	Advertising and promotion	100		100	
13	Office expenses	6,128		6,128	· · · · · · · · · · · · · · · · · · ·
14	Information technology	0,120		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
15	Royalfies				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings			1	
20	Interest.,,,,,,,,,,	442		442	
21	Payments to affiliales				
22	Depreciation, depletion, and amortization				<u> </u>
23	Insurance	4,755	11 Nov. 12 12 12 12 12 12 12 12 12 12 12 12 12	4,755	
24	Offiner expenses. Remize expenses not covered				
	above (List miscellaneous expenses on line 24e. If			kuviliituk	
	line 24e amount exceeds 10% of fine 25, column				
	(A) amount, list time 24e expenses on Schedule O.)		i in ingentakografisi,	100 4 200 100 100 100 100 100 100 100 100 100	[3/62+1/3/34 x 8/4/51]
a	Program costs	8,054	_	1 001	
D	Telephone and internet	1,881		1,881	
ď	Miscellaneous expenses	11			· · · ·
•	All other expenses				
25	Total functional expenses. Add lines 1 through 24e.	193,163	168,916	24,247	0
25 26	Joint costs. Complete this line only if the	253,143	200,920	47447	,
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation. Check here	,	;]	
	following SOP 98-2 (ASC 958-720)				

U.S. CHESS CENTER Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1	236,632
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director,			
		trustae, key employee, creator or founder, substantial contributor, or 35%		edy™g "Nacio	
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (es defined		288	The second
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	. , ,	8	•••
å	9	Prepaid expenses and deferred charges		9	
-	10a	Land, buildings, and equipment cost or other	Tradition (1980) 2010 (1980)		\$ 41000 B \$1.000
	} '	basis. Complete Part VI of Schedule D 10a			
	ь			10c	
	11"	investments - publicly traded securities		11	
	12	Invesiments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, fine 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)		- * *	236,632
	17	Accounts payable and accrued expenses		17	200,002
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrew or custodial account liability. Complete Part IV of Schedule D		21	
_	22	Loans and other payables to any current or former officer, director,	TO KAR DALKASLASIY	14 (2) (2)	900000000000000000000000000000000000000
至	-	trustee, key employee, creator or founder, substantial contributor, or 35%			
				22	
Ï	23	controlled entity or family member of any of these persons		23	
	24	Unsacured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third	` ` `		
	23	parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	ŀ	25	
	۰				
	26	Total liabilities. Add lines 17 through 25	O	26	512414,000,000,400,000
		-			
ĕ	شد ا	and complete lines 27, 28, 32, and 33.	200 500	(1,5)3() 37	Mainta radiosilia
Ž	27	Net assets without donor restrictions	203,693	27 28	236,632
8	28	Net assets with donor restrictions	* * * * * * * * * * * * * * * * * * *	20	0+10154 s 105654W0 819 11
2		Organizations that do not follow FASB ASC 958, check here □	以外发生的关键	ni mijeri Gaza zira	la la ciglia de médica de la como la c
Ę	_ ا	and complete lines 29 through 33.	Contract to the State of the St		
ē	29	Capital stock or trust principal, or current funds	· · ·	29	
Net Assets or Fund Balances	30	Pald-in or capital surplus, or land, building, or equipment fund	· • · 	30	
₹	31	Retained earnings, endowment, accumulated income, or other funds		31	
2	32	Total net assets or fund batancea	203,693	32	236,632
	33	Total liabilities and net assets/fund balances	203,693	33	236,632

om	990 (2019) U.S. CHESS CENTER	52-17584	23 Page 12
Pa	Reconciliation of Net Assets		
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>	<u> </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	. 1	226,102
2	Total expenses (must equal Part IX, column (A), line 25)	. 2	193,163
3	Revenue less expenses. Subtract line 2 from line 1	. 3	32,939
4	Net assets or fund betances at beginning of year (must equal Part X, line 32, column (A))	. 4	203,693
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	236,632
Pa	TXII Financial Statements and Reporting		
	Check if Schedule O contains a response or note to any line in this Part XII		. .
	, , , , , , , , , , , , , , , , , , ,		Yes No
1	Accounting method used to prepare the Form 990: 🗵 Cash 🔲 Accrus) 🔲 Other		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		
	Schedute O.		
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 on a separate basis, consolidated basis, or hoth:		
	Separate basis Consolidated basis Both consolidated and separate basis		
b	Were the organization's financial statements audited by an independent accountant?		26 X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		
	separate basis, consolidated basis, or both:		
	Separate basis Consolidated basis Both consolidated and separate basis		
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of		1
_	the audit, review, or compilation of its financial statements and selection of an independent accountant?		26
	If the organization changed either its oversight process or selection process during the tex year, explain on		Property No.
	Schedule O.		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the		1 1
-,	Single Audit Act and OMB Circular A-133?		. 3a
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		·
_	required audit or audits, explain why on Schedule O and describe any sleps taken to undergo such audits		3h
	to person assumed to the second strain and the second seco	******	Form 600 /2010)

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SCHEDULE A

Public Charity Status and Public Support

Complete if the organization is a section \$61(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Affach to Form 990 or Form 990-EZ.

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

2019 Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service
Manne of the organization

(C)

(D)

(E) Total

Department of the Treasury

(Form 990 or 999-EZ)

Employer Identification number

52-1758423 U.S. CHESS CENTER Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 A school described in section 170(b)(1)(A)(ii), (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(lili). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 saction 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi), (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part ft.) An agricultural research organization described in section 170(b)(1)(A)(bx) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes 12 of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. a Type t. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. c Type RI functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III. functionally integrated, or Type III non-functionally integrated supporting organization. Provide the following information about the supported organization(s). (i) Name of supported organization (NI) Type of organization (iv) la the organization M Amount of menetary (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see instructions) instructions? ((annitosnisori aseti avode document? Yes No A **(B)**

U.S. CHESS CENTER 52-1758423 Schedule A (Form 990 or 990-EZ) 3019 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization falled to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support

	Most or Laber Arbborr	T		· · · · · · · · ·		 	
	endar year (or fiscal year beginning in)▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and	,					
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the		j·			i i	
	organization's benefit and either paid	+					
	to or expended on its behalf		·				
3	The value of services or facilities	_	<u> </u>				
	furnished by a governmental unit to the					l	
	organization without charge					·	
4	Total. Add lines 1 through 3			:			
5	The portion of total contributions by					M4 (1) (2) (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on	Strategic Code Section (See)			" "人名英格兰		
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)			級立法 泽洲			
6	Public support. Subtract line 5 from line 4		488 W.W	PR (17.24).	10 March 12.		
	etion B. Total Support	1, 3= 3	*	1, 11, 11, 11, 11, 11, 11, 11, 11, 11,	1 1 11 11		
	endar year (or fiscal year beginning in)▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 4						
	Gross income from interest, dividends,						
-	payments received on securities loans,]]					
	rents, royalties and income from	1					
	similar sources , , ,	1					
	Net income from unrelated business		i				
39	activities, whether or not the business	•	!				
	,	ļ					
4.0	is regularly carried on		,	• • • • •	 		
10	Other income. Do not include gain or						
	loss from the sate of capital assets						
	(Explain in Part VI.)	vice and analysis of the	and the later of the	Carlotto Joseph Chean	i Milianti se me ilikum	n dia ang atau sa sa sa sa sa sa sa sa sa sa sa sa sa	
				Lagrania (1994)			
	Gross receipts from retated activities, etc. (s			• • • • • • • • • • • • • • • • • • • •		12	<u> </u>
13	First five years. If the Form 990 is for the or						
	organization, check this box and stop here	<u> </u>		• • • • • • • •		<i></i>	<u></u> ▶ 🛚
	tion C. Computation of Public Suppor						
	Public support percentage for 2019 (line 6, c			• **		14	<u>%</u>
	Public support percentage from 2018 Sched					15	<u>%</u>
168	33 1/3% support test - 2019. If the organize			_			
	box and stop here. The organization qualifie						
Ľ	33 1/3% support test - 2018. If the organiza						
	this box and stop here. The organization qu			-			
17a	10%-facts-and-circumstances test - 2019.	_				-	
	10% or more, and if the organization meets t			•			
	Part VI how the organization meets the "fact			•	-		_
	organization						
Ė	10%-facts-and-circumstances test - 2018.	•					ne
	15 is 10% or more, and if the organization m	eets the "facts	-and-circumsta	inces" test, che	eck this box an	d stop here.	
	Explain in Part VI how the organization meet	ts the "facts-an	d-circumstance	es" test. The o	rganization qua	alifies as a publi	cly
	supported organization						▶ □
18	Private foundation. If the organization did r						_
	instructions	<u></u>	<u> </u>	<u></u>	<u> </u>	<i>.</i>	▶ 🛚

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.)

	if the Organization tales to quality	V Direct Wiles to	ato listeu CCR	M, picaso co	mptoto i arti	14.)	
	ction A. Public Support	(a) 2045	(h) 2040	(m) 2017	(4D 2049	(a) 2010	(f) Total
	endar year (or fiscal year beginning in) >	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(i) rotai
1	Gifts, grants, contributions, and membership fees	l	المماء ا	المماد		41	106 200
_	received. (Do not include any "unusual grants.")	42,146	10,894	31,843	30,500	71,015	186,398
2	Gross receipts from admissions, merchandise sold or services performed, or facilities	ļ				1	
	furnished in any activity that is related to the]					AM- 44-
_	organization's fax-exempt purpose	182,366	183,347	194,404	258,634	152,690	971,441
3	Gross receipts from activities that are not an	1					
	unrelated trade or business under section 513.						
4	Tax revenues levied for the					ľ	
	organization's benefit and either paid to		ļ.	i			
	or expended on its behalf			···			
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total, Add lines 1 through 5	224,512	194,241	226,247	289,134	223,705	1,157,839
7a	Amounts included on lines 1, 2, and 3			Ì	ı		
	received from disqualified persons						
þ	Amounts included on lines 2 and 3					ļ	
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year					42,707	42,707
C	Add lines 7a and 7b		i			42,707	42,707
8	Public support. (Subtract line 7c from				HANGO PAL	A. A. A. A. A. A. A. A. A. A. A. A. A. A	
	tine 6.)	karakana i	EN FREE SA				1,115,132
Sec	ction B. Total Support						
	endar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6	224,512		226,247	289,134	223,705	1,157,839
-	Gross income from interest, dividends,					.,	
	payments received on securities loans, rents,		i -				
	royalties, and income from similar sources	57	77	153	2,275	1,724	4,286
h	Unrelated business taxable income (less				_,,		•
-	section 511 taxes) from businesses	i					
	acquired after June 30, 1975						
	Add lines 10a and 10b	57	77	153	2,275	1,724	4,286
_	Net income from unrelated business	ļ				7,720	
"	activities not included in line 10b, whether						
	or not the business is regularly carried on						
40	Other Income. Do not include gain or						
12	loss from the sale of capital assets	ļ					
	,	1	12			[12
44	(Explain in Part VI.)				-	<u></u>	
13	Total support. (Add lines 9, 10c, 11,			225 422	201 400	225 420	1 162 197
	and 12.)	224,569				·	1,162,137
14	First five years, if the Form 990 is for the o	-					
_	organization, check this box and stop here			• • • • • <u>• • • • • • • • • • • • • • </u>	 		
	ction C. Computation of Public Suppo					l de l	55 55 8/
	Public support percentage for 2019 (line 8, o					15	95.96 %
	Public support percentage from 2018 School			· · · · <u>· · · · · · · · · · · · · · · </u>		16	99.97 %
<u>Se</u>	ction D. Computation of investment in					I .= I	
17						17	0.00 %
18	investment income percentage from 2018 S	ichedule A, Pai	rt III, line 17.	• • • • • • • •		18	0.00%
198	33 1/3% support tests - 2019. If the organi	zation did not o	neck the box o	n line 14, and l	line 15 is more	tnan 33 1/3%,	and line
	17 is not more than 33 1/3%, check this box						
b	33 1/3% support tests - 2018. If the organi						
	line 19 is not more than 33 1/3% check this	how and etan.	here. The was	mization nualiti	ies as a nu bli d	v supported ord	ranization ► 🕍

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Old the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Dld the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? if "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) total a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		2	135
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)		·	1777
	below, the governing body of a supported organization?	11a	i	
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	<u> </u>	
Sec	tion B. Type I Supporting Organizations			
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		Yes	No
1	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	15.4	450	30.0
	tax year? If "No," describe in Pert VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			9-7-3
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	10.0	1130	
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			Police.
		1		
2	Did the organization operate for the benefit of any supported organization other than the supported		474	O.
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Pert	-1.		
	VI how providing such benefit cerried out the purposes of the supported organization(s) that operated,	5.56		1.39
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations		1	T
		F 28 7	Yes	No
٦	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	145.40°		
	or trustees of each of the organization's supported organization(s)? If TNo," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed		20,000	: Table 1
	the supported organization(s).	<u> </u>		
Jec	tion D. All Type III Supporting Organizations		Yes	No
4	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	27.53	22	700
1	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			W. C. C. C.
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	5 A - 5 T	J. 4. J.
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	1.30	10.30	ζ. i
-	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	1.7	1	-:
3	By reason of the relationship described in (2), did the organization's supported organizations have a	2	100 - 200	10111111
•	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			1
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see II	struc	tions).
а	The organization satisfied the Activities Test. Complete line 2 below.			
ħ	The organization is the parent of each of its supported organizations. Complete line 3 below.			
¢	The organization supported a governmental entity. Describe in Part VI how you supported a government entity	(see ir	<u>istruc</u>	tions).
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	1000	200	
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI Identify	2.7		100
	those supported organizations and explain how these activities directly furthered their exempt purposes.	\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\		
	how the organization was responsive to those supported organizations, and how the organization determined	1276		32.3
	that these activities constituted substantially all of its activities.	2a		ļ
þ	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	(*	P. 34	
	reasons for the organization's position that its supported organization(s) would have engaged in these	2.93	[· ;***	14
_	activities but for the organization's involvement.	2b	13000	, a 1.2 k d
3		1000		[j.:4]
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	200	Later 1	15.7 si
	trustees of each of the supported organizations? <i>Provide details in Part VI</i> . Did the constitution exemine a substantial degree of direction over the policies, programs, and activities of each	3a	71 b	V 200
D	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3b	Y	2.3%
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	70	I	l

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting On	gani	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying	trust	on Nov. 20, 1970 (explain i	n Part VI). See
instructions. All other Type III non-functionally integrated supporting organization	zatio	ns must complete Sections .	
Section A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Offiner expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minknum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see	T		
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c. Fair market value of other non-exempt-use assets	1c	:	
d Total (add lines 1a, 1b, and 1c)	14		
e Discount daimed for blockage or other	7.		
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,	T		
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	<u> </u>	
6 Multiply line 5 by .035.	6		<u></u>
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5	数分数数数数数数数	
6 Distributable Amount, Subtract line 5 from line 4, unless subject to	\top		
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionally	integ	rated Type III supporting or	ganization (see
instructions).			-

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)						
Sec	Current Year					
1	Amounts paid to supported organizations to accomplish exe					
2	Amounts paid to perform activity that directly furthers exempt	t purposes of supported				
	organizations, in excess of income from activity					
3	Administrative expenses paid to accomplish exempt purpos	es of supported organizat	ions			
4	Amounts paid to acquire exempt-use assets					
5	Qualified set-aside amounts (prior IRS approval required)					
6	Other distributions (describe in Part VI). See instructions.					
7	Total annual distributions, Add lines 1 through 6.		 			
8	Distributions to attentive supported organizations to which the	je organization is respons	sive			
	(provide details in Part VI), See instructions.					
9	Distributable amount for 2019 from Section C, line 6	 		·		
10	Line 8 amount divided by line 9 amount	<u> </u>	4785	J+PE1		
_	best and the state of the state	(i)	(ii)	(iii)		
9	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable		
	District China Control	Water Carte of the contract of the con-	Pre-2019	Amount for 2019		
	Distributable amount for 2019 from Section C, line 6	From Grand with 100 months		DVV 970m na 5 sa aug 60. T		
2	Underdistributions, if any, for years prior to 2019		,			
	(reasonable cause required - explain in Part VI). See					
	instructions.					
				egi geren jarrogan jaron antidoro. Top in efektiva i vie re kanan antidoro.		
	From 2014 , ,					
	From 2015	in a serie de la composition della composition d				
	From 2016		e de Maria de la composição de la compos	<u>en destre en lan 1966 (la 1967)</u> Se militar despis sur en la marco.		
-		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	Total of lines 3a through e	The Control of the State of the Control				
	Applied to underdistributions of prior years	Court College College	<u>Direkting na manggaran na manggan yang berata da</u>			
_	Applied to 2019 distributable amount			<u>kar — ar başının ilk erlərəkleri ildə</u>		
	Carryover from 2014 not applied (see instructions)	1.2.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1		78790 % 360% n		
÷	Remainder, Subtract lines 3g, 3h, and 3i from 3f.					
4	Distributions for 2019 from					
•	Section D, line 7:					
	Applied to underdistributions of prior years					
	Applied to 2019 distributable amount	37/10/21/3/27/27/3				
	Remainder, Subtract lines 4a and 4b from 4.	1				
5						
	any. Subtract lines 3g and 4a from line 2. For result					
	greater than zero, explain in Part VI. See instructions.					
6	Remaining underdistributions for 2019. Subtract lines 3h	To be the second of the second				
	and 4b from fine 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2020. Add lines 3j					
	and 4c.					
8	Breakdown of line 7:	Control of the Contro				
a	Excess from 2015					
	Excess from 2016					
C	Excess from 2017					
đ	Excess from 2018			2.25.25.25.25.25.25.25.25.25.25.25.25.25		

d Excess from 2018 e Excess from 2019

Schedule A (Form 990 or 990 EZ) 2019							
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, Ilne 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E,						
	lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)						
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Schedule B (Form 990, 990-EZ, or 996-PF)

or 996-PF) Department of the Treasury Internal Revenue Service

Name of the organization

U.S. CHESS CENTER

Schedule of Contributors

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

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

OMB No. 1545-0047

Employer identification number

52-1758423

2019

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

Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

U.S. CHESS CENTER

Employer identification manber

52-1758423

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
	Share Fund of Greater Washington Co 1325 G Street Suite 480 Washington, DC 20005	\$10,000	Person Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
2	Collins Investment Group LLC 6901 Rockledge Dr 730 Bethesda, MD 20817	- \$\$,000	Person Payroll Noncash (Complete Part ti for noncash contributions.)			
(a) No.	(b) Name, address, and ZiP + 4	(c) Total contributions	(d) Type of contribution			
	-	- _ \$	Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
<u></u>	;	- - -	Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		- \$	Person Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll			

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

> Attach to Form 990 or 990-EZ.

2019

2019

Department of the Treasury Internal Revenue Service Name of the organization ► Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection Employer identification number

U.S. CHESS CENTER 52-1758423 01. Form 990 governing body review (Part VI, line 11) Pt VI, Line 11b; Form 990 is distributed to the members of the board and it is discussed Pt VI, Line 11b: among the members 02. Conflict of interest policy compliance (Part VI, line 12c) Pt VI, Line 12c: Each year at the board meeting we provide a copy of the company's policies and ask Board members to re-read, ask questions, disclose any information and sign the Board Commitment Letter showing that they have re-reviewed the policies for corporate files. These policies include conflict of interest, Executive Director compensation and general polices 03. CEO, executive director, top management comp (Part VI, line 15a) Pt VI, Line 15a: The process of determining compensation of CEO or top management Pt VI, Line 15a: includes review of exemparable data before it is approved 04. Other officer or key employee compensation (Part VI, line 15b Pt VI, Line 15b: The process of determining compensation of CEO or top manangement Pt VI, Line 15b: includes review of comparable data bewforce it is approved 05. Governing documents, etc, available to public (Part VI, line 19) Pt VI, Line 19: The Organization makes available to the public its governing documents. and financial statements upon request.