Short Form
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/Form990EZ for instructions and the latest information.

A For the 2019 calendar year, or tax year beginning , 2015, and ending , 2020

B Check if appl’ble:

<table>
<thead>
<tr>
<th>Address change</th>
<th>Name change</th>
<th>Initial return</th>
<th>Final return/tax filed</th>
<th>Amended return</th>
<th>Application pending</th>
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</table>

C Name of organization:

SEGUNDA QUIMBAMBA FOLKLORIC CENTER, INC.

D Employer identification number:

22-3515056

E Telephone number:

201.420.6332

F Group Exemption Number:

G Accounting Method:

Cash

Accrual

Other (specify) □

H Check □ if the organization is not required to attach Schedule B

J Tax-exempt status (check only one) □ 501(c)(3) □ 501(c)(4) □ (insert no) □ 4947(a)(1) □ 527

K Form of organization:

Corporation □

Trust □

Association □

Other □

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are $200,000 or more, or if total assets (Part II, column B) are $500,000 or more, file Form 990 instead of Form 990-EZ

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I □

1 Contributions, gifts, grants, and similar amounts received

12,849

2 Program service revenue including government fees and contracts

22,366

3 Membership dues and assessments

3

4 Investment income

4

5a Gross amount from sale of assets other than inventory

5a

5b Less: cost or other basis and sales expenses

5b

5c Gain or loss from sale of assets other than inventory (subtract line 5b from line 5a)

5c

6 Gaming and fundraising events:

a Gross income from gaming (attach Schedule G if greater than $15,000)

6a

b Gross income from fundraising events (not including $ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds $15,000)

6b

c Less: direct expenses from gaming and fundraising events

6c

d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)

6d

7a Gross sales of inventory, less returns and allowances

7a 4,992

7b Less: cost of goods sold

7b 2,724

c Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)

7c 2,268

8 Other revenue (describe in Schedule O)

8 1,638

9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8

9 39,321

10 Grants and similar amounts paid (list in Schedule O)

10 3,000

11 Benefits paid to or for members

11

12 Salaries, other compensation, and employee benefits

12

13 Professional fees and other payments to independent contractors

13 14,005

14 Occupancy, rent, utilities, and maintenance

14 2,221

15 Printing, publications, postage, and shipping

15 1,989

16 Other expenses (describe in Schedule O)

16 14,056

17 Total expenses. Add lines 10 through 16

17 35,271

18 Excess or (deficit) for the year (subtract line 17 from line 9)

18 4,050

19 Net assets or fund balances at beginning of year (from line 27, column A) (must agree with end-of-year figure reported on prior year’s return)

19 15,726

20 Other changes in net assets or fund balances (explain in Schedule O)

20

21 Net assets or fund balances at end of year. Combine lines 18 through 20

21 20,776

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 106421

Form 990-EZ (2019)
**Part II  Balance Sheets** (see the instructions for Part II)
Check if the organization used Schedule O to respond to any question in this Part II.

<table>
<thead>
<tr>
<th></th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>22</td>
<td>Cash, savings, and investments</td>
<td>19,666</td>
</tr>
<tr>
<td>23</td>
<td>Land and buildings</td>
<td>23</td>
</tr>
<tr>
<td>24</td>
<td>Other assets (describe in Schedule O)</td>
<td>2,035</td>
</tr>
<tr>
<td>25</td>
<td>Total assets</td>
<td>21,701</td>
</tr>
<tr>
<td>26</td>
<td>Total liabilities (describe in Schedule O)</td>
<td>4,975</td>
</tr>
<tr>
<td>27</td>
<td>Net assets or fund balances (line 27 of column (B) must agree with line 21)</td>
<td>16,726</td>
</tr>
</tbody>
</table>

**Part III  Statement of Program Service Accomplishments** (see the instructions for Part III)
Check if the organization used Schedule O to respond to any question in this Part III.

What is the organization's primary exempt purpose?  **CULTURAL and EDUCATIONAL**

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

**28 Cultural Performances of Puerto Rican Bomba & Plena:**
Accomplishments in this area were highlighted by SQFC's 2019 tour in Puerto Rico. Performances included a feature presentation in Salinas, Puerto Rico as part of Centro Cuyabé's... (continued Schedule O)
(Grants $ ) if this amount includes foreign grants, check here ▶ □ 28a 13,921

**29 Teaching Workshops on Puerto Rican Bomba & Plena Drum & Dance:**
The organization's excellent work in offering teaching opportunities to share the richness of Puerto Rico's... (continued Schedule O)
(Grants $ 3,000) if this amount includes foreign grants, check here ▶ □ 29a 3,000

**30 Puerto Rico Arts Partnership:**
As noted above, 2019 was the first time SQFC sponsored an exchange between our performers/instructors in New Jersey and our counterparts in Puerto Rico. Our relationship with... (continued Schedule O)
(Grants $ ) if this amount includes foreign grants, check here ▶ □ 30a 3,000

**31 Other program services (describe in Schedule O)**
(Grants $ ) if this amount includes foreign grants, check here ▶ □ 31a

**32 Total program service expenses** (add lines 28a through 31a) ▶ □ 32 32,813

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**Part IV  List of Officers, Directors, Trustees, and Key Employees** (list each one even if not compensated—see the instructions for Part IV)
Check if the organization used Schedule O to respond to any question in this Part IV.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and title</th>
<th>(b) Average hours per week devoted to position</th>
<th>(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)</th>
<th>(d) Health benefits, contributions to employee benefit plans, and deferred compensation</th>
<th>(e) Estimated amount of other compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>NANETTE HERNANDEZ, President &amp; Board Member</td>
<td>30</td>
<td>5,285</td>
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<tr>
<td>7</td>
<td>JENN DICKENSON, Treasurer &amp; Board Member</td>
<td></td>
<td>1</td>
<td></td>
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<tr>
<td>7</td>
<td>JUAN CARTAGENA, Executive Director &amp; Board Member</td>
<td>10</td>
<td>1,390</td>
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</tr>
</tbody>
</table>
33. Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O.

34. Were any significant changes made to the organizing or governing documents? If "Yes," attach a conforming copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions.

35a. Did the organization have unrelated business gross income of $1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?

b. If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O.

c. Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III.

36. Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N.

37a. Enter amount of political expenditures, direct or indirect, as described in the instructions.

b. Did the organization file Form 1120-POL for this year?

38a. Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?

b. If "Yes," complete Schedule L, Part II, and enter the total amount involved.

39. Section 501(c)(7) organizations. Enter:

a. Initiation fees and capital contributions included on line 9.

b. Gross receipts, included on line 9, for public use of club facilities.

40a. Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:

b. Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I.

c. Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.

d. Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization.

e. All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.

41. List the states with which a copy of this return is filed.

42a. The organization's books are in care of Juan Cartagena. Telephone no. 201.420.6332.

b. At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?

If "Yes," enter the name of the foreign country.

See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).

42c. At any time during the calendar year, did the organization maintain an office outside the United States?

If "Yes," enter the name of the foreign country.

43. Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year.

44a. Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ.

b. Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ.

c. Did the organization receive any payments for indoor tanning services during the year?

d. If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

45a. Did the organization have a controlled entity within the meaning of section 512(b)(13)?

b. Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions.
**Part VI Section 501(c)(3) Organizations Only**

All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule C to respond to any question in this Part VI

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
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<td>50</td>
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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

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

Did the organization make any transfers to an exempt non-charitable related organization?

If “Yes,” was the related organization a section 527 organization?

Complete this table for the organization’s five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than $100,000 of compensation from the organization. If there is none, enter “None.”

<table>
<thead>
<tr>
<th>(a) Name and title of each employee</th>
<th>(b) Average hours per week devoted to position</th>
<th>(c) Reportable compensation (Forms W-2/1099-MISC)</th>
<th>(d) Health benefits, contributions to employee benefit plans, and deferred compensation</th>
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Total number of other employees paid over $100,000

Complete this table for the organization’s five highest compensated independent contractors who each received more than $100,000 of compensation from the organization. If there is none, enter “None.”

<table>
<thead>
<tr>
<th>(a) Name and business address of each independent contractor</th>
<th>(b) Type of service</th>
<th>(c) Compensation</th>
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Total number of other independent contractors each receiving over $100,000

Did the organization complete Schedule A? Note: All section 501(c)(3) organizations must attach a completed Schedule A

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Date: 05/26/22

Paid Preparer Use Only

Check if self-employed

PTIN: P01382470

May the IRS discuss this return with the preparer shown above? See instructions

Form 990-EZ (2019)