Form **990-EZ**

OMB No. 1545-1150

Department of the Treasury Internal Revenue Service

Short Form

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form,
990. All other org- anizations with gross receipts less than \$1,000,000 and total assets
less than \$2,500,000 at the end of the year may use this form.

The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

Α	For t	he 2008 ca	lendar y	year, or tax	year beg	inning			, 2008	B, and e	ndir	ıg				,		
В	Check	if applicable:		C Name of	organization	1								D En	nploye	er identi	ification nui	nber
	Addre	ss change	Please use IRS	PLOVDI.	V ELS	ASSOC	IATION	PELS	A INC P	ELSA				2	6-3	3124	099	
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		nization type					(insert no.)		1947(a)(1) or	527		990	D-EZ, c	or 990-P	F).		•	
K	Chec	k ► X if	the orga						rganization a	and its g	gross	s rec	eipts a	are norm	ally	not m	ore than	
									a return, be									
L	Add	lines 5b, 6l	b, and 7	b, to line 9	to deterr	nine gross	receipts; i	f \$1,00	0,000 or mo	re, file f	Forn	n 990	0					
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	17	Total exp	enses (add lines 1	0 through	16)								<u></u> ′▶	17			238.
	18														18			462.
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26-3124099

Page 2

Form 990-EZ (2008) PLOVDIV ELS ASSOCIATION PELSA INC PELSA

Pai	rt V Other Information (Note the statement requirement in General Instruction V.)			
			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	33		Х
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes	34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.			
i	a Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?	35a		Х
ı	b If 'Yes,' has it filed a tax return on Form 990-T for this year?	35 b		
	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' complete applicable parts of Schedule N	36		Х
37 a	a Enter amount of political expenditures, direct or indirect, as described in the instructions			
ı	b Did the organization file Form 1120-POL for this year?	37b		Х
38 a	a 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 unpaid at the start of the period covered by this return?	38 a		Х
I	b If 'Yes,' complete Schedule L, Part II and enter the total amount involved			
	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			
40 6	section 4911 \(\dots\) ; section 4915 \(\dots\)			
ı	b 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' complete Schedule L, Part I	40 b		Х
•	c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
(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	40 e		Х
	List the states with which a copy of this return is filed >	400	l	- 21
42 a	a The books are in care of ► George Varimezov Telephone no. ► (347)_ Located at ► 419 Lafayette Street New York NY ZIP + 4 ► 10003		<u>-70</u> (00_
ı	b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a		Yes	No
•	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		Х
	If 'Yes,' enter the name of the foreign country:▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts.			
(c At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		Х
	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		- □	
			Yes	No
44	Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	44		Х
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	45		Х

Form 990-EZ (2008) PLOVDIV ELS ASSOCIATION PELSA INC PELSA 26-3124099 Page 4 Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51. No Yes Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I 46 46 Х Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II ... 47 Х Х Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 48 49a Did the organization make any transfers to an exempt non-charitable related organization? 49 a Х Complete this table for the 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.' (b) Title and average (c) Compensation (d) Contributions to employee (e) Expense account and (a) Name and address of each employee paid more than \$100,000 benefit plans and hours per week devoted to position deferred compensation other allowances none Total number of other employees paid over \$100,000 51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None. (a) Name and address of each independent contractor paid more than \$100,000 (b) Type of service (c) Compensation none Total number of other independent contractors receiving over \$100,000 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 Signature of officer Date Here Type or print name and title. Preparer's Identifying Number (See instructions) Date Check if Paid signature employed Pre-

FIN

Phone no. ►

►X Yes

Form **990-EZ** (2008)

No

Preparer

Non-Paid

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

Firm's name (or

yours if self-employed), address, and ZIP + 4

parer's

Use

Only

BAA

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

nonexempt charitable trusts. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

PLOVDIV ELS ASSOCIATION PELSA INC PELSA 26-3124099 Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions) The organization is not a private foundation because it is: (Please check only one organization.) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) 4 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 **section** 5 **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). 6 7 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.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 9 June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes 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 that 11 describes the type of supporting organization and complete lines 11e through 11h. Type I Type II Type III - Functionally integrated Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box ... Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11 g (i) a family member of a person described in (i) above? 11 g (ii) a 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the organizations the organization supports h (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (ii) EIN (v) Did you notify the organization in col. (i) of (i) Name of Supported Organization (vi) Is the organization in col. (i) organized in the U.S.? (iv) Is the (vii) Amount of Support rganization in col your support? governing document? Yes No Yes Yes Total

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

Schedule A (Form 990 or 990-EZ) 2008

Part II 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.) Section A. Public Support Calendar year (or fiscal year (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total beginning in) Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')... 700. 700. Tax revenues levied for the organization's benefit and either paid to it or expended The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge Total. Add lines 1-3 700. 700. The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) ... Public support. Subtract line 5 700. from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2004 (f) Total (b) 2005 (c) 2006(d) 2007 (e) 2008 beginning in) **7** Amounts from line 4 700 700. Gross income from interest. dividends, payments received on securities loans, rents. royalties and income form similar sources Net income form unrelated business activities, whether or not the business is regularly carried on Other income. Do not include 10 gain or loss form the sale of capital assets (Explain in Part IV.) Total support. Add lines 7 700. through 10 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here **►** X Section C. Computation of Public Support Percentage % 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f) 14 15 Public support percentage for 2007 Schedule A, Part IV-A, line 26f % 16a 33-1/3 support test - 2008. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. b 33-1/3 support test - 2007. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization. 17a 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.

Private foundation. If the organization did not check a box on line, 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

(Complete	only	if you	checked	the box	on lin	e 9 of Pai	rt I.)

Sec	tion A. Public Support						
	ndar year (or fiscal yr beginning in)►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')						
	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt						
3	purpose						
4	not an unrelated trade or business under section 513						
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1-5						
ŀ	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c	: Add lines 7a and 7b						
8	Public support (Subtract line						
	7c from line 6.)						
Sec	tion B. Total Support						
Cale	ndar year (or fiscal yr beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6						
t	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
11	: Add lines 10a and 10b						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 14	Total support. (add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 is organization, check this box and	s for the organiza	tion's first, second	d, third, fourth, or	r fifth tax year as	a section 501(c)(3)	▶∏
Sec	tion C. Computation of Pub						<u> </u>
	Public support percentage for 200			e 13, column (f))			%
	Public support percentage from 2	-	•			-	%
	tion D. Computation of Inve			-			
	Investment income percentage for			by line 13, colum	nn (f))	17	%
18	Investment income percentage from	om 2007 Schedul	e A, Part IV-A, lin	e 27h		18	%
	33-1/3 support tests – 2008. If the more than 33-1/3%, check this bo	e organization did	not check the box	x on line 14, and	l line 15 is more th	an 33-1/3%, and li	ine 17 is not ►
	22 1/2			1: 14 10	and line 10 is use	than 22 1/20/	
Ł	33-1/3 support tests — 2007. If the is not more than 33-1/3%, check	e organization did this box and stop	hot check a box on the hore. The organize	on line 14 or 19a, zation qualifies as	and line 16 is mo a publicly suppor	ted organization.	and line 18

Schedule A	(Form	990 or 9	90-EZ	2008	P1	LOVDI	V E	LS Z	ASSO	CIAT	'ION	PELS	SA INC	PELS	A 2	26-3	1240	99	Page 4
Part IV	Supp	lemen	tal In	forma	tion.	. Com	plete	this	part	to p	rovid	e the	explana	ation re	equire	d by l	Part _.	II, line 10 nstructior);
	Part I	I, line	17a (or 17b	; or	Part I	II, Iir	ie 12	2. Pro	ovide	any	other	additio	nal info	ormati	on. (see i	nstruction	าร)
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										·									
	. — — —																		
										·									

Form 990-EZ, Part I, Line 16 Other Expenses Statement	
Other expenses (describe)	
Check printing charges	143.
Organization expenses	 85.

Form 990-EZ: Short Form Return of Organization Exempt From Income Tax

Special Events and Activities Smart Worksheet

If the organization reports more than \$15,000 on line 6a (not including the contribution amount in the parenthesis), then Part II of Schedule G should be completed for events with gross receipts greater than \$5,000.

If the organization reports more than \$15,000 on line 6a (not including the contribution amount in the parenthesis) and any part of the amount is gross revenue from gaming, then it must complete Schedule G, Part III, to report its gaming activities.

See the instructions for more information.

	Yes	No			
Is the organization required to complete Schedule G?		Х			
QuickZoom to Schedule G, page 2, Part II, Fundraising Events					
QuickZoom to Schedule G, page 2, Part III Gaming					