_	99	<u> </u>			Datu	-	4 0-	~~~!-						. т.				OMB No. 154	5-0047	
Form	33	•			Retu	rn o	or Ur	ganiz	ation	Exemp	ιг	rom Inc	come	e la	X			2020	า	
			Under	sect	tion 501	l(c), 52	27, or 4	4947(a)(*	1) of the	Internal Re	ven	ue Code (ex	cept p	rivate	found	lations		2020	,	
Denartn	ent of th	e Treasury			Do no	ot ente	r socia	al securi	ity numb	ers on this	forr	n as it may	be mad	de pul	blic.			Open to P	ublic	
•		e Service			🕨 Go	to wu	w.irs.	gov/Fori	<i>m</i> 990 for	instructio	ns ai	nd the lates	t inforr	natio	n.			Inspection	on	
A Fo	or the 2	2020 calend	ar year, c	or tax	k year b	eginn	ing					, 2020, a	and end	ding				, 20		
B Ch	eck if ap	plicable:	C Na	me of	organizati	ion Fou	ndat:	ion fo	or Pac	kaging E	lduc	cation				D Emp	loyer ic	dentification nu	umber	
Ad	dress ch	ange			isiness as												85	-1652230)	
	me char	nge	Nu	mber	and street	t (or P.O.	box if ma	ail is not de	livered to s	treet address)			Room/s	uite		E Telep	bhone n	umber		
22	tial returr	1	113	S	West	Stre	et											03) 535-1	386	
	al return	/terminated	Cit	y or to	wn, state	or provin	nce, coun	ntry, and ZIF	or foreign	postal code						G Gros				
☐ An	nended r	eturn			dria,											\$		22	23,301	
	plication	pending							ael D'	Angelo				H(a)	Is this a g	roup return	for subo			
<u> </u>	•	1 5			s C a										Are all s				=	
I Ta	I Tax-exempt status: 🗴 501(c)(3) 🗌 501(c) () ◀ (insert no.) 🗌 4947(a)(1) or 🗌 527 If "No," attach a list. S																			
	J Website: N/A H(c) Group exemption numl																			
-		<u> </u>	Corporation	Π	Trust	Assoc	iation	Other	•		1	Year of format	ion [.] 20			itate of le				
Par		Summar		·		_ //0000	ation					Tour of format		20	1		garaon			
		Briefly descri		ganiz	vation's	missio	n or mo	ost signif	icant acti	vities s	inn	ort the	deve		ont a	and d	lieti	ribution	of	
		employee		0				0		-										
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naı	:	rigia bo.	k, anu	Te.	Iaceu	sup	pry (Indus	LIIES										
Governance	2	Check this be	y ▶ 🗌 i	f the	organiz	ration c	lisconti	inued its	operatio	ns or dispos	ed o	of more than	25% of	f its ne	et asset					
ß		Number of vo			-											3	1		7	
¢٥		Number of in	0			•	U		-	,						4			<u> </u>	
Activities &		Total number	•		-			-			,					5			<u> </u>	
tivi								•	•	,						-			7	
Ac		6 Total number of volunteers (estimate if necessary) 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a																		
		Net unrelated							· /·							7b			0	
			DUSITIES	s lax		ome n		111 990-1	, Faiti, i		••		<u> </u>					0		
	8 (Contributions	and gran	ate (E	Port V/III	lino 1	b)							Pri	or Year			Current Ye		
e			Ũ	`			,												23,299	
nue		9 Program service revenue (Part VIII, line 2g)											0							
Revenue			`			. ,	-		'										2	
œ		Other revenu	•			,				,									0	
		Total revenue Grants and s			•					()	,		_						23,301	
					• •		,	()/	,				·						0	
		Benefits paid			•			. ,	,				·						0	
es		Salaries, oth	•					`	-	().									0	
Expenses		Professional		•	•	-	`	· ·	É.										0	
ďx		Total fundrais Other expens																		
ш		•	`	'	`	,,		,	,										8,932	
		Total expens			•		•		• • •										8,932	
	19	Revenue les	sexpense	es. c	Subtract	line ro		iine iz			••								14,369	
Net Assets or Fund Balances		Total assets	Dert V li	10	->>									ginning	of Curre	ent Year		End of Yea		
ssef Bala																		22	21,124	
et A Ind		Total liabilitie	•		- /														6,755	
Par		Net assets of Signatu			s. Subi	ractim		om line 4	20 • • •		••		•					2.	14,369	
		s of perjury, I dec			amined th	nis return	includin	a accompa	anving sche	dules and state	ments	s and to the be	st of my ki	nowledg	ne and be	elief it is				
		nd complete. De												nomedę	go ana be					
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Sign			ael D'A	Ange	eto												ate			
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		<u> </u>			Bethe													-6371	<u> </u>	
iviay th		discuss this								ions)	• •			• •			• • •	. 🗚 Yes	<u>No</u>	

	n 990 (2020) Foundation for Packaging Education	85-1652230	Page 2
Pa	rt III 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:		
	Support the development and distribution of employee education and training	resources fo	r the
	workforce in the corrugated, folding carton, rigid box, and related supply c	chain industr	ies
2	Did the organization undertake any significant program services during the year which were not listed on the	_	_
	prior Form 990 or 990-EZ?	🗌 Yes	X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	_	_
	services?	· · · · 📋 Yes	<u>x</u> No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as measu		
	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.		
4-			
4a)
	Support the development and distribution of employee education and training		
	workforce in the corrugated, folding carton, rigid box, and related supply o	chain industr	les
4b	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)
			,
4c	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)
44	Other program convisos (Describe on Schodule O.)		
4d	Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)	
40)	
4e	Total program service expenses		

ł	=orm	990) (2	2020
I	Par	t I\	<	(

20)	Foundation	for	Packaging	Education
Checklist of	ules			

	· ·			
	In the experimetion department in position $EO(a)(2)$ or $AO(7/a)(4)$ (other then a private foundation)? If "Map "		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes,"</i> complete Schedule A			
2	Is the organization required to complete Schedule B, Schedule of Contributors See instructions?	1 2	х 	
2		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 I	3		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		<u>x</u>
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		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
-	complete Schedule D, Part VI	11a		х
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more	110		
C	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		v
لم		TIC		x
a	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	44.4		
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u>x</u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u>x</u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	-		
	If "Yes," complete Schedule G, Part III	19		х
20 a				x
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		<u> </u>
4 I	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		v
		<u> </u>		х

	n 990 (2020) Foundation for Packaging Education	85-16522	30	F	age 4
Pa	rt IV 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	ſ			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the				
	organization's current and former officers, directors, trustees, key employees, and highest compensated				
	employees? If "Yes," complete Schedule J		23		х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than				
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	I			
	through 24d and complete Schedule K. If "No," go to line 25a		24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year				
C	to defease any tax-exempt bonds?		24c		
4	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?				<u> </u>
d			24d		<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	I			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	I			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?				
	If "Yes," complete Schedule L, Part I		25b		х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	I			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	I			
	controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part II		26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key				
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee	I			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these				
	persons? If "Yes," complete Schedule L, Part III.		27		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 filing thresholds, conditions, and exceptions):	I			
-	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	I			
а	"Yes," complete Schedule L, Part IV	I	200		
			28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	•••••	28b		x
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	I			
	"Yes," complete Schedule L, Part IV · · · · · · · · · · · · · · · · · ·		28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	•••••	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	I			
	conservation contributions? If "Yes," complete Schedule M		30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	I			
	complete Schedule N, Part II		32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations				
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,				
•••	or IV, and Part V, line 1		34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		35a		X
-	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a		554		
b		I	35b		
~~	, , , , , , , , , ,		350		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	I			
	related organization? If "Yes," complete Schedule R, Part V, line 2 · · · · · · · · · · · · · · · · · ·	•••••	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	I			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	•••••	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	I			
	19? Note: All Form 990 filers are required to complete Schedule O.		38	х	
Par					
	Check if Schedule O contains a response or note to any line in this Part V	<u></u> .	<u></u>	<u></u>	
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	0			
b	Enter the number of Form W-2G included in line 1a. Enter -0- if not applicable	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and				
-	reportable gaming (gambling) winnings to prize winners?		1c	х	

85-1652230

Page 4

Form 990 (2020)

	m 990 (2020) Foundation for Packaging Education 85-165223				
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)				
			Yes	No	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax				
h	Statements, filed for the calendar year ending with or within the year covered by this return	2b			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		X		
20	Did the organization have unrelated business gross income of \$1,000 or more during the year?			v	
3a b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	-		<u>x</u>	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,	50			
τa	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x	
b	If "Yes," enter the name of the foreign country	ти			
2	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		х	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		x	
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?.	5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		х	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or				
	gifts were not tax deductible?	6b			
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods				
	and services provided to the payor?	7a		х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				
	required to file Form 8282?	7c		х	
d	If "Yes," indicate the number of Forms 8282 filed during the year				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		х	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the				
	sponsoring organization have excess business holdings at any time during the year?	8			
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the sponsoring organization make any taxable distributions under section 4966?				
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			
10	Section 501(c)(7) organizations. Enter:				
a ⊾	Initiation fees and capital contributions included on Part VIII, line 12	-			
b 44	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-			
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders				
a h	Gross income from other sources (Do not net amounts due or paid to other sources	-			
b	against amounts due or received from them.) • • • • • • • • • • • • • • • • • • •				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	-			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a			
-	Note: See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which				
-	the organization is licensed to issue qualified health plans				
с	Enter the amount of reserves on hand				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		x	
b	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				
	excess parachute payment(s) during the year?	15		х	
	If "Yes," see instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х	
	If "Yes," complete Form 4720, Schedule O.				

Form	990	(2020)
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Form	Foundation for Packaging Education 85-1652230					
Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a	"No"				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.					
	Check if Schedule O contains a response or note to any line in this Part VI			. x		
Sec	tion A. Governing Body and Management					
			Yes	No		
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.					
b	Enter the number of voting members included in line 1a, above, who are independent	_				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with					
_	any other officer, director, trustee, or key employee?	2		x		
3	Did the organization delegate control over management duties customarily performed by or under the direct					
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		x		
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		x		
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X		
6 70	Did the organization have members or stockholders?	6		x		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	70				
h		7a		x		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	70		x		
0	the year by the following:					
а	The governing body?	8a	x			
b	Each committee with authority to act on behalf of the governing body?	8b	x	<u> </u>		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	0.0		<u> </u>		
•	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		x		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)					
			Yes	No		
10a	Did the organization have local chapters, branches, or affiliates?	10a		x		
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,					
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b				
11a			x			
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13.	12a	х			
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х			
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"					
	describe in Schedule O how this was done	12c	x			
13	Did the organization have a written whistleblower policy?	13	х			
14	Did the organization have a written document retention and destruction policy?	14	х			
15	Did the process for determining compensation of the following persons include a review and approval by					
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official	15a		х		
b	Other officers or key employees of the organization	15b		х		
	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?	16a		х		
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?	16b		х		
	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed					
18	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.					
_	Own website Another's website X Upon request Other (explain on Schedule O)					
19	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					
	The Organization (703)535-1386, 113 S West Street, Alexandria, VA 22314		000	0000		
		Form	yun /	2020)		

Form 990 (202		85-1652230	Page 7							
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest C Independent Contractors	Compensated Employe	es, and							
	Check if Schedule O contains a response or note to any line in this Part VII		🗌							
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees									
1a Complete	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.

x Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

						arry ou				
		(C) Position								
(A)	(B)	(do r	ot che			han one		(D)	(E)	(F)
Name and title	Average	box,	unles	s per	son is	s both a	n	Reportable	Reportable	Estimated amount
	hours per week	offic	er and	l a dir	rector	/trustee)	compensation from the	compensation from related	of other compensation
	(list any							organization	organizations	from the
	hours for	Indiv or di	Insti	Officer	Key	High	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
	related	recto	lutio	ġ	emp	lest o	ner			related organizations
	organizations	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee				
	below dotted line)	stee	uste		Ð	oens				
	dottod into)		æ			ated				
(1) Matt_Davis	<u>1.00</u>									
Director		х						0	0	0
(2) Gary Brewer	<u>1.00</u>									
Director		х						0	0	0
(3) Joe Palmeri	<u>1.00</u>									
Director		х						0	0	0
(4) Jay Carman	2.00									
Director		х						0	0	0
(5) Gene_Marino	1.00									
Director		х						0	0	0
(6) Jana Harris	<u>1.00</u>									
Director		х						0	0	0
(7) Al Hoodwin	1.00									
Chair		х		х				0	0	0
(8) Michael D'Angelo	<u>1.00</u>									
Executive Director				x				0	0	0
<u>(9)</u>										
(10)										
<u>(11)</u>										
<u>(12)</u>										
<u>(13)</u>										
<u>(14)</u>										
										,

	990 (202	0) Foundation for Pa	ckaging	Educ	ati	on					85	5-16522	230	P	age 8
Part	: VII	Section A. Officers, Directors, Trustee	s, Key Empl	loyees	, and	d Hig	ghes	st Con	npei	nsated Employees	s (continue	d)			
		(A) Name and title	(B) Average hours per week (list any	box. offic	, unle: er an	Po leck n ss pe d a di	rson i rector	han one s both a /trustee	in :) 1	(D) Reportable compensation from the organization	(E) Reporta compensa from rela organiza	able ation ated	cor	(F) ated amo of other npensati rom the	
			hours for related organizations below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-I	MISC)		nization a I organiz	
<u>(15)</u>															
(16)															
<u>(17)</u>															
<u>(18)</u>															
<u>(19)</u>															
(20)															
(21)															
(22)															
(23)															
(24)															
(25)															
1b	Subto	tal							• •						
С		rom continuation sheets to Part VII, Sec							• 🕨						
d		add lines 1b and 1c) • • • • • • • • • • • • • • • • • • •										0			0
2		umber of individuals (including but not limitable compensation from the organization		isted a	bove	e) wl	ho re	eceive	d mo	ore than \$100,000	of				0
3	Did the	e organization list any former officer, direct	or, trustee, k	ey emp	oloye	e, c	or hig	hest o	comp	pensated				Yes	No
	employ	yee on line 1a? If "Yes," complete Schedul	e J for such i	ndividu	al								3		х
4		y individual listed on line 1a, is the sum of zation and related organizations greater the													
		ual • • • • • • • • • • • • • • • • • • •											4		х
5		y person listed on line 1a receive or accrue vices rendered to the organization? <i>If</i> "Yes				-			-				5		
Sect		Independent Contractors	, complete c	scheuu	ie J	101 3	sucri	perso					5		x
1	Compl	ete this table for your five highest compensions and the organization. Report com										tax year.			
	•	(A) Name and business addre							Ĭ	(B) Description of servic			(C)	ation	
													Compens		
									-						
2	Total n	umber of independent contractors (includir	ng but not lim	nited to	thos	se lis	sted	above	L e) wh	10					

►

received more than \$100,000 of	compensation from the organization
---------------------------------	------------------------------------

Form 99					acka	aging Educati	lon		85-16522	30 Page 9
Part	VIII	Statement of Rev Check if Schedule O co			o or n	ote to any line in th	is Part VIII			Г
		Check in Schedule O da	Jilai				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
	_ 1a	Federated campaigns .			1a					
ts ts	b	Membership dues • • •	• •		1b					
Contributions, Gifts, Grants and Other Similar Amounts	c	Fundraising events			1c					
Am (d	Related organizations •			1d					
, Gif ilar	e	Government grants (cont		-	1e					
Sir	f	All other contributions, gil and similar amounts not i	-		1f	222.200				
ther	g	Noncash contributions in				223,299				
d O Li	9	lines 1a-1f			1g	\$				
arco	h						223,299			
						Business Code				
θ	2a									
^م کن	b									
Sei	c									
Program Service Revenue	d									
ngo R	е									
ā		All other program service								
		Total. Add lines 2a-2f .								
	3	Investment income (includ other similar amounts)					2			2
	4	Income from investment o					2			2
	5	Royalties			•					
		,		(i) Real		(ii) Personal				
	6a	Gross rents	6a							
	b	Less: rental expenses	6b							
	c	Rental income or (loss)	6c							
	d	Net rental income or (loss)) <u> </u>			🕨				
	7a	Gross amount from		(i) Securitie	es	(ii) Other				
		sales of assets								
	h	other than inventory Less: cost or other basis	7a							
ē	D D	and sales expenses	76							
enu	c	Gain or (loss)								
Other Revenue		Net gain or (loss)		•		▶				
ler I		Gross income from fundra								
G		events (not including \$	-							
		of contributions reported o	n line	е						
		1c). See Part IV, line 18			8a					
		Less: direct expenses .			8b					
		Net income or (loss) from		raising events	s .	···· ►				
	9a	Gross income from gaming	-							
	h	activities, See Part IV, line Less: direct expenses .			9a 9b					
		Net income or (loss) from				′ <u> </u> ▶				
		Gross sales of inventory, lo	-							
	ling	returns and allowances			10a					
	b	Less: cost of goods sold			10k	D				
		Net income or (loss) from			<u> </u>	· · · · · · •				
						Business Code				
Suc	11a									
anc	b					ļ				
Miscellanous Revenue	C									ļ
Mis R	-	All other revenue				L				
		Total. Add lines 11a-11d						-	-	-
	12	Total revenue. See instru-	CLION	5		🏲	223,301	0	0	2

Foundation for Packaging Education **Statement of Functional Expenses** Part IX

Sect	ion 501(c)(3) and 501(c)(4) organizations must complete all co	olumns. All other organiz	ations must complete	column (A).	
	Check if Schedule O contains a response or note to	any line in this Part IX			
Do n	ot include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
8b, 9	b, and 10b of Part VIII.	וטומו פאטפוושפט	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22 • • • • • • • • • • • • •				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16 • • • •				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees •••••••••••••••				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17 •				
f	Investment management fees • • • • • • • • • • • • • • • • • •				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.) •••				
12	Advertising and promotion				
13	Office expenses	2,177		2,177	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20					
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23					
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
a	Awards and Grants	6,587	6,587		
b	Other	168		168	
C					
d	-				
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	8,932	6,587	2,345	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here 🌗 🔲 if				

following SOP 98-2 (ASC 958-720)

.

Page	1	1
I aye		

Par	t X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			🗌
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing		1	41,124
	2	Savings and temporary cash investments		2	
S	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	180,000
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under 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	
As	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	0	16	221,124
	17	Accounts payable and accrued expenses		17	6,755
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ies	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
Lial		controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
				25	
	26	Total liabilities. Add lines 17 through 25 Opposize that follows: FAOR ADD OFF shock have	0	26	6,755
s		Organizations that follow FASB ASC 958, check here K			
JCe	27	and complete lines 27, 28, 32, and 33.		27	014 0.00
alaı	27 28	Net assets without donor restrictions		27 28	214,369
Ä	20	Organizations that do not follow FASB ASC 958, check here		20	
ŭ		and complete lines 29 through 33.			
ЪГF	20	Capital stock or trust principal, or current funds		29	
ts c	29 30	Paid-in or capital surplus, or land, building, or equipment fund		29 30	
sse	30 31	Retained earnings, endowment, accumulated income, or other funds		30	
Net Assets or Fund Balances	32	Total net assets or fund balances	0	31	211 260
Ne	33	Total liabilities and net assets/fund balances	0	33	214,369
	33		0	33	221,124

Form 990 (2020)

EEA

Form	990 (2020) Foundation for Packaging Education 8	5-165223	0	Pa	age 12
Pai	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				<u>. </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1		223,	301
2	Total expenses (must equal Part IX, column (A), line 25)	2		8,	932
3	Revenue less expenses. Subtract line 2 from line 1	3		214,	369
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			
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		214,	369
Pai	rt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				<u>· 🛛 –</u>
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		х
	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				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	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				
	Single Audit Act and OMB Circular A-133?		3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			— • • • • •	000 /	0000

Form 990 (2020)

SCH	EDU	ILE	Α
(Earm	000	~r 0	

Public Charity Status and Public Support

, Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trus

OMB No. 1545-0047

			Complete if the organize	ation is a section 50	1(c)(3) organization or a se	ection 4947	(a)(1) nonex	empt charitable trust.			
Department of the Treasury Internal Revenue Service Go			► Got	Attach to Form 990 or Form 990-EZ. to www.irs.gov/Form990 for instructions and the latest information.					Open to Public Inspection		
Name of the organization								Employer identifica	•		
		-	ackaging Educa	tion				85-16522			
	rt I				rganizations must o	complete	e this par				
The	orga				s 1 through 12, check on			,			
1	Ň		•		ches described in section	•	,				
2	П				Schedule E (Form 990 or		~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~				
3	П				described in section 17		(iii).				
4	П	•		-	with a hospital describe)(A)(iii). Enter the			
•			e, city, and state:					<i>(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</i>			
5	П	•		efit of a college or i	university owned or operation	ated by a d	overnment	tal unit described in			
Ŭ		-)(1)(A)(iv). (Complete I	-	aniversity owned or open	alou by u g	joverninern				
6	П				nit described in section 1	70(b)(1)(A)(v)				
7	x		•	-	t of its support from a go			m the general public			
•		-	ection 170(b)(1)(A)(vi)			vonnionta		in the general public			
8	П		rust described in section								
9	Н	-			on 170(b)(1)(A)(ix) opera	ated in con	iunction wit	th a land-grant colleg	۵		
Ŭ					see instructions). Enter th				0		
		university:	a non land grant cone	ge of agriculture (c		ie name, e	ity, and sta	te el trie conege el			
10	П		n that normally receive	s: (1) more than 33	3 1/3% of its support from	n contributi	ons memb	pership fees and gros	SS		
		-	•	. ,	subject to certain exception						
		•		•	isiness taxable income (I		,				
					ection 509(a)(2). (Compl						
11	П		-		est for public safety. See		,				
12	Н	-			the benefit of, to perform			o carry out the nurnos	200		
12		-	-	-	ed in section 509(a)(1) o			• • •			
					ne type of supporting org						
	а		-		sed, or controlled by its s				-		
	-				appoint or elect a major				5		
			organization. You mu			ity of the t					
	b		•	-	trolled in connection with	n its sunno	rted organi	ization(s) by having			
	~			·	on vested in the same pe		-		h		
			on(s). You must comp								
	с				nization operated in conr	nection with	n and funct	tionally integrated wit	h		
	•				must complete Part IV				•••		
	d			,	organization operated in				n(s)		
					generally must satisfy a d			•			
				•	Part IV, Sections A and		•				
	е				determination from the I			Type II. Type III			
		_	0		itegrated supporting orga) ,	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	f			-							
	g		llowing information abo								
	-	i) Name of supported	-	(ii) EIN	(iii) Type of organization	(iv) Is the o	rganization	(v) Amount of monetary	(vi) Amount of		
		,	U U		(described on lines 1-10		ur governing	support (see	other support (see		
					above (see instructions))	docum	nent?	instructions)	instructions)		
						Yes	No				
(A)											
<u> </u>											
(B)											
(C)											
(C)											
(D)											
(D)											
(E)											

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

Total

	dule A (Form 990 or 990-EZ) 2020 Foundatio	n for Packa	aging Educa	tion		85-165223	
Pa	rt II Support Schedule for Organiz						
	(Complete only if you checked the						lify under
_	Part III. If the organization fails to	o qualify und	er the tests li	sted below, p	lease comple	ete Part III.)	
	ction A. Public Support		,	i	1	,	
Cal	endar year (or fiscal year beginning in)►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	- , 3 ,						
	membership fees received. (Do not						
	include any "unusual grants.")					223,299	223,299
2	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3					223,299	223,299
5	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)						232,136
6	Public support. Subtract line 5 from line 4						(8,837)
See	ction B. Total Support						
Cal	endar year (or fiscal year beginning in)►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4					223,299	223,299
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from						
	similar sources					2	2
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
11	Total support. Add lines 7 through 10.						223,301
	Gross receipts from related activities, etc. (s	ee instructions	s)			12	
	First five years. If the Form 990 is for the o)(3)
	organization, check this box and stop here					· · · · · · · · · ·	· · · · > 🛛
Se	ction C. Computation of Public Suppo	rt Percentag	ge				
	Public support percentage for 2020 (line 6, c			column (f)) .		14	%
	Public support percentage from 2019 Sched					15	%
	33 1/3% support test - 2020. If the organization					3% or more, che	ck this
	box and stop here. The organization qualified						
k	33 1/3% support test - 2019. If the organization			-			
	this box and stop here . The organization qu						
17a	10%-facts-and-circumstances test - 2020.	If the organiz	ation did not cl	neck a box on	line 13, 16a, o	r 16b, and line 1	
	10% or more, and if the organization meets						
	Part VI how the organization meets the facts				-	-	
	organization			-	-		_
ł	010%-facts-and-circumstances test - 2019						
	15 is 10% or more, and if the organization m	-					
	in Part VI how the organization meets the fa						
	organization			-	-		_
18	Private foundation. If the organization did r						
	instructions						▶ □

Schedule A (Form 990 or 990-EZ) 2020

Cal	endar year (or fiscal year beginning in)►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513 .						
4	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	L					
	Total. Add lines 1 through 5	ļ					
7a	Amounts included on lines 1, 2, and 3						
_	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
-	or 1% of the amount on line 13 for the year						
_	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
Sec	line 6.)	<u>. </u>					
	endar year (or fiscal year beginning in)►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6	(u) _0.0			(0) =0.0		(1) 1 0 10
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)			<u> </u>			
14	First 5 years. If the Form 990 is for the orga				•	. , .	,
500	organization, check this box and stop here ction C. Computation of Public Suppo						· · · · · 🕨 📋
	Public support percentage for 2020 (line 8, c			column (f))		15	%
	Public support percentage from 2019 Sched	.,				16	%
	ction D. Computation of Investment In			<u></u>			/0
17				line 13. colum	n (f))	17	%
18	Investment income percentage from 2019 S		•			18	%
19a	33 1/3% support tests - 2020. If the organiz					e than 33 1/3%	, and line
	17 is not more than 33 1/3%, check this box						
b	33 1/3% support tests - 2019. If the organiz	-	-			• •	
	line 18 is not more than 33 1/3%, check this						
20	Private foundation. If the organization did r	not check a bo	x on line 14, 19	9a, or 19b, che	ck this box an	d see instructio	ns 🕨 🗌
FEA						Cohodulo A /For	m 990 or 990-E7) 2020

90 or 990-EZ) 2020Foundation for Packaging EducationSupport Schedule for Organizations Described in Section 509(a)(2)

If the organization fails to qualify under the tests listed below, please complete Part II.)

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

Schedule A (Form 990 or 990-EZ) 2020

Section A. Public Support

Part III

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Schedu	le A (Form 990 or 990-EZ) 2020 Foundation for Packaging Education 85-165223	0	F	Page 4
Part				
	(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complet	e Sec	ctions	sА
	and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part	I, cor	nplet	е
	Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete			
Sect	ion A. All Supporting Organizations		,	
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing		100	110
•	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.	1		
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).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	lines 3b and 3c below.	3a		
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.	3b		
~	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)	0.0		
C	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	20		
4 -	• • • •	3c		
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 lines 4b and 4c below.	4a		
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.	4b		
С	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.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
u	answer lines 5b and 5c 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).	<u>5a</u>		
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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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.	6		
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).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	-		
0		0		
0-	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
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 .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	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.	9c		
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.	10a		
h		iva		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	104		
	determine whether the organization had excess business holdings.)	10b		
EEA	Schedule A (F	orm 990	or 990-l	EZ) 2020

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- Yes No **11** Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization? 11a b A family member of a person described in line 11a above? 11b c A 35% controlled entity of a person described in 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. 11c Section B. Type I Supporting Organizations Yes No 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the 1 supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated. supervised, or controlled the supporting organization. 2 Section C. Type II Supporting Organizations Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors 1 or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). 1 Section D. All Type III Supporting Organizations Yes No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the 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 organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported 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). 2 By reason of the relationship described in line 2, above, did the organization's supported organizations have 3 a 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 3 supported organizations played in this regard. Section 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 instructions). The organization satisfied the Activities Test. *Complete line 2 below.* а The organization is the parent of each of its supported organizations. Complete line 3 below. b c The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions). Activities Test. Answer lines 2a and 2b below. Yes No 2 a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify
 - the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify** 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 that these activities constituted substantially all of its activities.
 - b Did the activities described in line 2a, above, 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 reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
 - 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
 - **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If "Yes" or "No," provide details in Part VI.*
 - **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*

2a

2b

3a

Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gani	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust	on Nov. 20, 1970 (expla	in in Part VI). See
	instructions. All other Type III non-functionally integrated supporting organiz	zatio	ns must complete Sectio	
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		
3	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	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
	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 0.015 of line 3 (for greater amount,			
	see instructions).	4		
	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
	Multiply line 5 by 0.035.	6		
_7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 0.85 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		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally	integ	grated Type III supporting	g organization
	(see instructions).			

Foundation for Packaging Education

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020

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	lle A (Form 990 or 990-EZ) 2020 Foundation for Packaging				2230 Page 7
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	zations (continue	ea)	
Sec	tion D - Distributions				Current Year
	Amounts paid to supported organizations to accomplish exen			1	
2	Amounts paid to perform activity that directly furthers exempt	purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purposes	s of supported organizat	tions	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required) - pr	rovide details in Part VI)	1	5	
6	Other distributions (describe in Part VI). See instructions.			6	
-	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	e organization is respon	sive		
	(provide details in Part VI). See instructions.	0		8	
9	Distributable amount for 2020 from Section C, line 6			9	
	Line 8 amount divided by line 9 amount			10	
	tion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2020	ns	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020				
	(reasonable cause required - <i>explain in Part VI).</i> See				
	instructions.				
3	Excess distributions carryover, if any, to 2020				
	From 2015				
	From 2016				
	From 2017				
	From 2018				
	From 2019				
	Total of lines 3a through 3e				
	Applied to underdistributions of prior years			-	
	Applied to 2020 distributions of phot years			_	
	••				
<u> </u>	Carryover from 2015 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from				
	Section D, line 7: \$				
	Applied to underdistributions of prior years				
	Applied to 2020 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if				
	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, explain in Part VI . See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2016				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
	First on a first and a second se				
	Excess from 2020				
EEA				sched	lule A (Form 990 or 990-EZ) 2020

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Pa 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, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
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, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, 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, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section
3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section
lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Department of the Treasury

Internal Revenue Service Name of the organization

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047
2020
Open to Public
Inspection

Employer identification number 85–1652230

Foundation for Packaging Education

01. Form 990 governing body review (Part VI, line 11)

The executive committee is e-mailed a copy of the preliminary draft form 990 and a 10-day

window is provided for negative confirmation.

02. Conflict of interest policy compliance (Part VI, line 12c)

The Organization maintains open communication between directors and employees,

furthermore, officers, directors, and key employees are made aware of new business

relationships as they are contracted when potential conflicts are discovered, top

management assesses the situation if a conflict exists, the person with a conflict is

prohibited from participating in the governing body's deliberations and decisions in the

transactions.

03. Governing documents, etc, available to public (Part VI, line 19)

The Organization makes its governing documents, conflict of interest policy, and financial

statements available to the public upon request.