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OMB No 1545-0047

Form 990-EZ

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.

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

A For the 2019 calendar year, or tax year beginning DECEMBER 1ST, 2019, and ending NOVEMBER 30TH, 20 20

B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending. C Name of organization: NEW YORK STATE BEAUTY SCHOOLS ASSOCIATION INC. D Employer identification number: 900130244. E Telephone number: 917-579-6479. F Group Exemption Number: [?].

G Accounting Method: [] Cash [x] Accrual Other (specify) [?]. H Check [x] if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: [?]

J Tax-exempt status (check only one) - [] 501(c)(3) [x] 501(c) (6) (insert no) [] 4947(a)(1) or [] 527

K Form of organization [x] Corporation [] Trust [] Association [] Other

L Add lines 5d, 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. \$ 19466

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) [x] Check if the organization used Schedule O to respond to any question in this Part I [x]

Table with 21 rows and 2 columns. Revenue section (lines 1-9) includes contributions, program service revenue, membership dues, investment income, gaming and fundraising events, and sales of inventory. Expenses section (lines 10-17) includes grants paid, salaries, professional fees, occupancy, printing, and other expenses. Net Assets section (lines 18-21) includes excess or deficit, and net assets at beginning and end of year.

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Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V

Form 990-EZ (2019) Part V Other Information. Questions 33-45b regarding significant activities, changes, income, and organizational details. Includes fields for political expenditures, tax amounts, and foreign accounts.

		Yes	No
46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46		✓

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 O to respond to any question in this Part VI

		Yes	No
47 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	47		
48 Is the organization 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?	49a		
b If "Yes," was the related organization a section 527 organization?	49b		

50 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."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

f Total number of other employees paid over \$100,000 ▶ _____

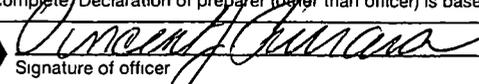
51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000 ▶ _____

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations must attach a completed Schedule A ▶ Yes No

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	 Signature of officer	1/14/21 Date	
	Vincent Ferrara-President Type or print name and title		

Paid Preparer Use Only	Print/Type preparer's name MARK A STEWART	Preparer's signature	Date	Check <input checked="" type="checkbox"/> if self-employed	PTIN P01324438
	Firm's name ▶ Stewart's Tax Service	Firm's EIN ▶ 061282124			
	Firm's address ▶ P O BOX 475, NEW HAMPTON, NY 10958	Phone no 8453425972			
	May the IRS discuss this return with the preparer shown above? See instructions ▶ <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				

**SCHEDULE O
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2020

**Open to Public
Inspection**

Name of the organization
New York State Beauty Schools Association Inc

Employer identification number
90-0130244

PART 1.

Line 2(Total of \$15,054): Teaxcher training classes 15,054, Printing fees 450

Line 8 Insurance refund 7

Line 16-Other Expenses(Total of \$8,986).

Insurance 1,694

Bank and credit card processing fees 638

Payroll taxes(Federal/NY State) 1,407

Web site fees 2,222

Registration fees 50

NY State Article 7A fee(FYE 11/30/2019) 25

Charitable contributions 1,500

Teacher training class refunds 1,450

PART III Organization's Primary Exempt Purpose

To promote and represent the common business interests and improve business conditions among owners and operators of beauty schools
within the meaning of Section 501(c)(6) of the Internal Revenue Code