

Form **1120**
Department of the Treasury
Internal Revenue Service

U.S. Corporation Income Tax Return

OMB No. 1545-0123

For calendar year 2015 or tax year beginning

, ending

► Information about Form 1120 and its separate instructions is at www.irs.gov/form1120.

2015

- A Check if:**
- 1a Consolidated return (attach Form 851) ☐
- b Life/nonlife consolidated return ☐
- 2 Personal holding co. (attach Sch. PH) ☐
- 3 Personal service corp. (see instructions) ☐
- 4 Schedule M-3 attached ☐

**TYPE
OR
PRINT**

Name
**INTERNATIONAL FIELD DIRECTORS AND
TECHNOLOGIES CONFERENCE INCORPORATE**

Number, street, and room or suite no. If a P.O. box, see instructions.

4604 MARCIA CT. W

City or town, state, or province, country, and ZIP or foreign postal code

ALEXANDRIA VA 22309

B Employer identification number

54-1747813

C Date incorporated

02/02/1995

D Total assets (see instructions)

\$ 51,088

E Check if: (1) Initial return (2) Final return (3) Name change (4) Address change

Income	1a Gross receipts or sales	1a		
	b Returns and allowances	1b		
	c Balance. Subtract line 1b from line 1a	1c		
	2 Cost of goods sold (attach Form 1125-A)	2		
	3 Gross profit. Subtract line 2 from line 1c	3		
	4 Dividends (Schedule C, line 19)	4		
	5 Interest	5		1
	6 Gross rents	6		
	7 Gross royalties	7		
	8 Capital gain net income (attach Schedule D (Form 1120))	8		
9 Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797)	9			
10 Other income (see instructions—attach statement)	10	See Stmt 1	500	
11 Total income. Add lines 3 through 10	11		501	
Deductions (See instructions for limitations on deductions.)	12 Compensation of officers (see instructions—attach Form 1125-E)	12		
	13 Salaries and wages (less employment credits)	13		
	14 Repairs and maintenance	14		
	15 Bad debts	15		
	16 Rents	16		
	17 Taxes and licenses	17		875
	18 Interest	18		
	19 Charitable contributions	19		
	20 Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)	20		
	21 Depletion	21		
	22 Advertising	22		
	23 Pension, profit-sharing, etc., plans	23		
	24 Employee benefit programs	24		
	25 Domestic production activities deduction (attach Form 8903)	25		
	26 Other deductions (attach statement)	26	See Stmt 2	1,592
	27 Total deductions. Add lines 12 through 26	27		2,467
	28 Taxable income before net operating loss deduction and special deductions. Subtract line 27 from line 11	28		-1,966
	Tax, Refundable Credits, and Payments	29a Net operating loss deduction (see instructions)	29a	
b Special deductions (Schedule C, line 20)		29b		
c Add lines 29a and 29b		29c		
30 Taxable income. Subtract line 29c from line 28 (see instructions)	30		-1,966	
31 Total tax (Schedule J, Part I, line 11)	31		0	
32 Total payments and refundable credits (Schedule J, Part II, line 21)	32		500	
33 Estimated tax penalty (see instructions). Check if Form 2220 is attached	33			
34 Amount owed. If line 32 is smaller than the total of lines 31 and 33, enter amount owed	34			
35 Overpayment. If line 32 is larger than the total of lines 31 and 33, enter amount overpaid	35		500	
36 Enter amount from line 35 you want: Credited to 2016 estimated tax	36	Refunded	500	

**Sign
Here**

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 taxpayer) is based on all information of which preparer has any knowledge.

May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes ☐ No

Signature of officer **BILL MOCKOVAK**

Date

Title **TREASURER**

Paid

Print/Type preparer's name

BENJAMIN LUONGO, CPA

Preparer's signature

Benjamin Luongo

Date

03/28/16

Check ☐ if self-employed

PTIN

P00368001

**Preparer
Use Only**

Firm's name

Luongo & Associates, PC, CPAs

Firm's address

**6223 Crain Highway
Upper Marlboro, MD 20772**

Firm's EIN

01-0770823

Phone no.

301-952-9437

Schedule C Dividends and Special Deductions (see instructions)		(a) Dividends received	(b) %	(c) Special deductions (a) x (b)
1	Dividends from less-than-20%-owned domestic corporations (other than debt-financed stock)		70	
2	Dividends from 20%-or-more-owned domestic corporations (other than debt-financed stock)		80	
3	Dividends on debt-financed stock of domestic and foreign corporations		see instructions	
4	Dividends on certain preferred stock of less-than-20%-owned public utilities		42	
5	Dividends on certain preferred stock of 20%-or-more-owned public utilities		48	
6	Dividends from less-than-20%-owned foreign corporations and certain FSCs		70	
7	Dividends from 20%-or-more-owned foreign corporations and certain FSCs		80	
8	Dividends from wholly owned foreign subsidiaries		100	
9	Total. Add lines 1 through 8. See instructions for limitation			
10	Dividends from domestic corporations received by a small business investment company operating under the Small Business Investment Act of 1958		100	
11	Dividends from affiliated group members		100	
12	Dividends from certain FSCs		100	
13	Dividends from foreign corporations not included on lines 3, 6, 7, 8, 11, or 12			
14	Income from controlled foreign corporations under subpart F (attach Form(s) 5471)			
15	Foreign dividend gross-up			
16	IC-DISC and former DISC dividends not included on lines 1, 2, or 3			
17	Other dividends			
18	Deduction for dividends paid on certain preferred stock of public utilities			
19	Total dividends. Add lines 1 through 17. Enter here and on page 1, line 4			
20	Total special deductions. Add lines 9, 10, 11, 12, and 18. Enter here and on page 1, line 29b			

Schedule J Tax Computation and Payment (see instructions)**Part I—Tax Computation**

1	Check if the corporation is a member of a controlled group (attach Schedule O (Form 1120))			
2	Income tax. Check if a qualified personal service corporation (see instructions)		2	0
3	Alternative minimum tax (attach Form 4626)		3	
4	Add lines 2 and 3		4	0
5a	Foreign tax credit (attach Form 1118)	5a		
b	Credit from Form 8834 (see instructions)	5b		
c	General business credit (attach Form 3800)	5c		
d	Credit for prior year minimum tax (attach Form 8827)	5d		
e	Bond credits from Form 8912	5e		
6	Total credits. Add lines 5a through 5e		6	
7	Subtract line 6 from line 4		7	
8	Personal holding company tax (attach Schedule PH (Form 1120))		8	
9a	Recapture of investment credit (attach Form 4255)	9a		
b	Recapture of low-income housing credit (attach Form 8611)	9b		
c	Interest due under the look-back method—completed long-term contracts (attach Form 8697)	9c		
d	Interest due under the look-back method—income forecast method (attach Form 8866)	9d		
e	Alternative tax on qualifying shipping activities (attach Form 8902)	9e		
f	Other (see instructions—attach statement)	9f		
10	Total. Add lines 9a through 9f		10	
11	Total tax. Add lines 7, 8, and 10. Enter here and on page 1, line 31		11	0

Part II—Payments and Refundable Credits

12	2014 overpayment credited to 2015	12	500
13	2015 estimated tax payments	13	
14	2015 refund applied for on Form 4466	14	()
15	Combine lines 12, 13, and 14	15	500
16	Tax deposited with Form 7004	16	
17	Withholding (see instructions)	17	
18	Total payments. Add lines 15, 16, and 17	18	500
19	Refundable credits from:		
a	Form 2439	19a	
b	Form 4136	19b	
c	Form 8827, line 8c	19c	
d	Other (attach statement—see instructions)	19d	
20	Total credits. Add lines 19a through 19d	20	
21	Total payments and credits. Add lines 18 and 20. Enter here and on page 1, line 32	21	500

Schedule K Other Information (see instructions)

1	Check accounting method: a <input type="checkbox"/> Cash b <input checked="" type="checkbox"/> Accrual c <input type="checkbox"/> Other (specify) ▶	Yes	No
2	See the instructions and enter the:		
a	Business activity code no. ▶ 611000		
b	Business activity ▶ PROFESSIONAL		
c	Product or service ▶ EDUCATION		
3	Is the corporation a subsidiary in an affiliated group or a parent-subsidary controlled group? If "Yes," enter name and EIN of the parent corporation ▶		X
4	At the end of the tax year:		
a	Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote? If "Yes," complete Part I of Schedule G (Form 1120) (attach Schedule G)		X
b	Did any individual or estate own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote? If "Yes," complete Part II of Schedule G (Form 1120) (attach Schedule G)		X

Schedule K Other Information continued (see instructions)**5** At the end of the tax year, did the corporation:

- a** Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation not included on **Form 851**, Affiliations Schedule? For rules of constructive ownership, see instructions.

If "Yes," complete (i) through (iv) below.

Yes	No
	<input checked="" type="checkbox"/>

(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage Owned in Voting Stock

- b** Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions.

If "Yes," complete (i) through (iv) below.

Yes	No
	<input checked="" type="checkbox"/>

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Country of Organization	(iv) Maximum Percentage Owned in Profit, Loss, or Capital

- 6** During this tax year, did the corporation pay dividends (other than stock dividends and distributions in exchange for stock) in excess of the corporation's current and accumulated earnings and profits? (See sections 301 and 316.)

If "Yes," file **Form 5452**, Corporate Report of Nondividend Distributions.

If this is a consolidated return, answer here for the parent corporation and on Form 851 for each subsidiary.

- 7** At any time during the tax year, did one foreign person own, directly or indirectly, at least 25% of (a) the total voting power of all classes of the corporation's stock entitled to vote or (b) the total value of all classes of the corporation's stock?

For rules of attribution, see section 318. If "Yes," enter:

(i) Percentage owned ▶ and (ii) Owner's country ▶

(c) The corporation may have to file **Form 5472**, Information Return of a 25% Foreign-Owned U.S. Corporation or a Foreign Corporation Engaged in a U.S. Trade or Business. Enter the number of Forms 5472 attached ▶

- 8** Check this box if the corporation issued publicly offered debt instruments with original issue discount ▶ ☐

If checked, the corporation may have to file **Form 8281**, Information Return for Publicly Offered Original Issue Discount Instruments.

- 9** Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$ 0

- 10** Enter the number of shareholders at the end of the tax year (if 100 or fewer) ▶

- 11** If the corporation has an NOL for the tax year and is electing to forego the carryback period, check here ▶ ☒

If the corporation is filing a consolidated return, the statement required by Regulations section 1.1502-21(b)(3) must be attached or the election will not be valid.

- 12** Enter the available NOL carryover from prior tax years (do not reduce it by any deduction on line 29a.) ▶ \$

- 13** Are the corporation's total receipts (page 1, line 1a, plus lines 4 through 10) for the tax year and its total assets at the end of the tax year less than \$250,000?

If "Yes," the corporation is not required to complete Schedules L, M-1, and M-2. Instead, enter the total amount of cash distributions and the book value of property distributions (other than cash) made during the tax year ▶ \$

- 14** Is the corporation required to file Schedule UTP (Form 1120), Uncertain Tax Position Statement (see instructions)?

If "Yes," complete and attach Schedule UTP.

- 15a** Did the corporation make any payments in 2015 that would require it to file Form(s) 1099?

- b** If "Yes," did or will the corporation file required Forms 1099?

- 16** During this tax year, did the corporation have an 80% or more change in ownership, including a change due to redemption of its own stock?

- 17** During or subsequent to this tax year, but before the filing of this return, did the corporation dispose of more than 65% (by value) of its assets in a taxable, non-taxable, or tax deferred transaction?

- 18** Did the corporation receive assets in a section 351 transfer in which any of the transferred assets had a fair market basis or fair market value of more than \$1 million?

Yes	No
<input checked="" type="checkbox"/>	

Yes	No
<input checked="" type="checkbox"/>	

Yes	No
<input checked="" type="checkbox"/>	

Yes	No
<input checked="" type="checkbox"/>	

Yes	No
<input checked="" type="checkbox"/>	

Yes	No
<input checked="" type="checkbox"/>	

Yes	No
<input checked="" type="checkbox"/>	

Yes	No
<input checked="" type="checkbox"/>	

Form 1120 (2015)

INTERNATIONAL FIELD DIRECTORS AND

54-1747813

Page 5

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash		26,551		46,835
2a	Trade notes and accounts receivable				
b	Less allowance for bad debts				
3	Inventories				
4	U.S. government obligations				
5	Tax-exempt securities (see instructions)				
6	Other current assets (att. stmt.) Stmt 3		2,500		4,253
7	Loans to shareholders				
8	Mortgage and real estate loans				
9	Other investments (attach stmt.)				
10a	Buildings and other depreciable assets				
b	Less accumulated depreciation				
11a	Depletable assets				
b	Less accumulated depletion				
12	Land (net of any amortization)				
13a	Intangible assets (amortizable only)				
b	Less accumulated amortization				
14	Other assets (attach stmt.)				
15	Total assets		29,051		51,088
Liabilities and Shareholders' Equity					
16	Accounts payable				
17	Mortgages, notes, bonds payable in less than 1 year				
18	Other current liabilities (att. stmt.) Stmt 4				22,750
19	Loans from shareholders				
20	Mortgages, notes, bonds payable in 1 year or more				
21	Other liabilities (attach statement)				
22	Capital stock: a Preferred stock				
	b Common stock				
23	Additional paid-in capital		21,020		21,020
24	Retained earnings—Appropriated (att. stmt.)				
25	Retained earnings—Unappropriated		8,031		7,318
26	Adjustments to SH equity (att. stmt.)				
27	Less cost of treasury stock				
28	Total liabilities and shareholders' equity		29,051		51,088

Schedule M-1 Reconciliation of Income (Loss) per Books With Income per Return

Note: The corporation may be required to file Schedule M-3 (see instructions).

1	Net income (loss) per books	-713	7	Income recorded on books this year not included on this return (itemize):	
2	Federal income tax per books	-1,253		Tax-exempt interest \$	
3	Excess of capital losses over capital gains				
4	Income subject to tax not recorded on books this year (itemize):		8	Deductions on this return not charged against book income this year (itemize):	
5	Expenses recorded on books this year not deducted on this return (itemize):			a Depreciation \$	
a	Depreciation \$			b Charitable contributions \$	
b	Charitable contributions \$				
c	Travel and entertainment \$		9	Add lines 7 and 8	
6	Add lines 1 through 5	-1,966	10	Income (page 1, line 28)—line 6 less line 9	-1,966

Schedule M-2 Analysis of Unappropriated Retained Earnings per Books (Line 25, Schedule L)

1	Balance at beginning of year	8,031	5	Distributions: a Cash	
2	Net income (loss) per books	-713		b Stock	
3	Other increases (itemize):			c Property	
			6	Other decreases (itemize):	
			7	Add lines 5 and 6	
4	Add lines 1, 2, and 3	7,318	8	Balance at end of year (line 4 less line 7)	7,318

54-1747813

Federal Statements

FYE: 12/31/2015

General Footnote

TAXPAYER RECEIVED EXEMPT STATUS EFFECTIVE 3/17/2015.
FUTURE TAX RETURNS WILL BE FILED ON 990 FORMS.

FOR BOOKKEEPING PURPOSES OF 2015:

FORM 1120 INCLUDES JAN 1, 2015 - MARCH 31, 2015.

FORM 990EZ INCLUDES APRIL 1, 2015 - DECEMBER 31, 2015.

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: **MAY 15 2015**

INTERNATIONAL FIELD DIRECTORS AND
TECHNOLOGIES CONFERENCE INC
WILSON HALL #133 PO BOX 644014
PULLMAN, WA 99164-4014

Employer Identification Number:
54-1747813
DLN:
17053078306015
Contact Person:
DAVID A DOEKER ID# 31168
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
509(a)(2)
Form 990 Required:
Yes
Effective Date of Exemption:
March 17, 2015
~~Contribution Deductibility:~~
Yes
Addendum Applies:
No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter:

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Sincerely,



Director, Exempt Organizations

Letter 947

54-1747813

Federal Statements

FYE: 12/31/2015

Statement 1 - Form 1120, Page 1, Line 10 - Other Income

Description	Amount
State Tax Refunds	\$ 500
Total	\$ 500

Statement 2 - Form 1120, Page 1, Line 26 - Other Deductions

Description	Amount
LEGAL & ACCOUNTING	\$ 640
POSTAGE	18
CONFERENCE EXPENSES	934
Total	\$ 1,592

Statement 3 - Form 1120, Page 5, Schedule L, Line 6 - Other Current Assets

Description	Beginning of Year	End of Year
PREPAID VIRGINIA INCOME TAXES	\$ 800	\$ 800
PREPAID FEDERAL INCOME TAXES	1,700	1,700
ACCOUNTS RECEIVABLE-OTHER		1,753
Total	\$ 2,500	\$ 4,253

Statement 4 - Form 1120, Page 5, Schedule L, Line 18 - Other Current Liabilities

Description	Beginning of Year	End of Year
A/P-CUSTOMER DEPOSIT	\$	\$ 22,750
Total	\$ 0	\$ 22,750

**INTERNATIONAL FIELD DIRECTORS AND
4604 MARCIA CT. W
ALEXANDRIA, VA 22309**

REPAIR AND CAPITALIZATION POLICY

INTERNATIONAL FIELD DIRECTORS AND hereby adopts for book and Federal income tax purposes the following policy regarding capitalization expenses for the year beginning on/after January 1, 2014. In accordance with Internal Revenue Code Sections 263, 167, 168 and related Regulations our Company has determined that amounts whose individual cost (including tax, installation and delivery costs) does not exceed \$2,500 will be deducted as incurred as an operating expense. Amounts exceeding this dollar limit will be examined individually to determine if their use or purpose requires capitalization under the betterment, adaptation or restoration rules used by the Internal Revenue Service and will be capitalized or expensed as incurred as a result of the application of those rules.

Year Ending: December 31, 2015

54-1747813

INTERNATIONAL FIELD DIRECTORS AND
4604 MARCIA CT. W
ALEXANDRIA, VA 22309

NOL Carryback Election

Under IRC Section 172(b)(3), the taxpayer elects to relinquish the entire two year carryback period with respect to any regular tax and AMT net operating loss incurred during the current tax year.

54-1747813

Federal Statements

FYE: 12/31/2015

Form 1120, Page 1, Line 5 - Interest

Description	Amount
INTEREST INCOME	\$ 1
Total	\$ 1

Form 1120, Page 1, Line 17 - Taxes and Licenses

Description	Amount
TAXES & LICENSES-OTHER	\$ 875
Total	\$ 875

Form 1120, Page 5, Schedule L, Line 23 - Additional Paid-In Capital

Description	Beginning of Year	End of Year
ADDITIONAL PAID IN CAPITAL	\$ 21,020	\$ 21,020
Total	\$ 21,020	\$ 21,020

Net Operating Loss Carryover Worksheet - Regular Tax

Form **1120****2015**

For calendar year 2015 or tax year beginning

, ending

Name

Employer Identification Number

INTERNATIONAL FIELD DIRECTORS AND**54-1747813**

Preceding Taxable Year	Adj. To NOL Inc/(Loss) After Adj.	Prior Year		Current Year	Next Year
		NOL Utilized (Income Offset)	Carryovers	Income Offset By NOL Carryback/ Carryover NOL Utilized	Carryover
18th 12/31/97					
17th 12/31/98	7,604	-7,604			
16th 12/31/99	-8,405	8,405			
15th 12/31/00	1,142	-1,142			
14th 12/31/01	8,809	-8,809			
13th 12/31/02	2,251	-2,251			
12th 12/31/03	2,581	-2,581			
11th 12/31/04	-10,324	10,324			
10th 12/31/05	5,433	-5,433			
9th 12/31/06	-3,443	3,443			
8th 12/31/07	-14,469	14,469			
7th 12/31/08	18,974	-18,974			
6th 12/31/09	13,448	-2,326			
5th 12/31/10	-1,601	1,601			
4th 12/31/11	5,726	-5,502			
3rd 12/31/12	-5,502	5,502			
2nd 12/31/13	10,140	-8,353			
1st 12/31/14	-8,353	8,353			
NOL Carryover Available To Current Year			0		
Current Year	0 -1,966				1,966
NOL Carryover Available To Next Year					1,966

Net Operating Loss Carryover Worksheet - AMT

Form **1120****2015**

For calendar year 2015 or tax year beginning

, ending

Name

Employer Identification Number

INTERNATIONAL FIELD DIRECTORS AND**54-1747813**

Preceding Taxable Year	Adj. To NOL Inc/(Loss) After Adj.	Prior Year		Current Year	Next Year
		NOL Utilized (Income Offset)	Carryovers	Income Offset By NOL Carryback/ Carryover NOL Utilized	Carryover
18th 12/31/97					
17th 12/31/98	6,844	-6,844			
16th 12/31/99	-8,405	8,405			
15th 12/31/00	1,028	-1,028			
14th 12/31/01	8,809	-8,809			
13th 12/31/02	2,251	-2,251			
12th 12/31/03	2,323	-2,323			
11th 12/31/04	-10,324	10,324			
10th 12/31/05	4,890	-4,890			
9th 12/31/06	-3,443	3,443			
8th 12/31/07	-14,469	14,469			
7th 12/31/08	17,077	-17,077			
6th 12/31/09	12,103	-6,154			
5th 12/31/10	-1,601	1,601			
4th 12/31/11	5,153	-5,153			
3rd 12/31/12	-5,502	5,502			
2nd 12/31/13	9,126	-8,702			
1st 12/31/14	-8,353	8,353			
NOL Carryover Available To Current Year			0		
Current Year	0 -1,966				1,966
NOL Carryover Available To Next Year					1,966

Return Carryover Summary

Form **1120/
1120S**

For calendar year 2015 or tax year beginning

_____, ending

2015

Name

INTERNATIONAL FIELD DIRECTORS AND

Employer Identification Number

54-1747813

[illegible]

FORM 500

Department of Taxation
PO Box 1500
Richmond, VA 23218-1500

2015 Virginia Corporation Income Tax Return



FISCAL or

Attention: Return must be filed electronically. Use this form only if you have an approved waiver.

Official Use Only

SHORT Year Filer: Beginning Date _____; Ending Date _____

☐ Short Year Return ☐ Change in Accounting Period

By checking the box to the right, I (we) authorize the Department to discuss this return with the undersigned preparer. →



FEIN 54-1747813		Check all that apply: <input type="checkbox"/> Initial Filer <input type="checkbox"/> Name Change <input type="checkbox"/> Mailing Address Change <input type="checkbox"/> Physical Address Change	
Name INTERNATIONAL FIELD DIRECTORS AND			
Mailing Address 4604 MARCIA CT. W			
City or Town ALEXANDRIA	State VA	ZIP Code 22309	
Physical Address (if different from Mailing Address)		Entity Type Code CC	
Physical City or Town	State	ZIP Code	NAICS 611000
Date Incorporated 02/02/1995	State or Country of Incorporation Virginia	Description of Business Activity PROFESSIONAL	

Check Applicable Boxes <input type="checkbox"/> Consolidated - Sch. 500AC Attached <input type="checkbox"/> Combined - Sch. 500AC Attached <input type="checkbox"/> Change in Filing Status <input type="checkbox"/> Multistate Sch. 500A Attached <input type="checkbox"/> Schedule 500AB Attached <input type="checkbox"/> Nonprofit Corporation	Final Return <input type="checkbox"/> Final Return - Check here and applicable boxes below. <input type="checkbox"/> Withdrawn <input type="checkbox"/> Dissolved-No longer liable for tax. Dissolved Date _____ <input type="checkbox"/> Merged Merger Date _____ Merged FEIN # _____ <input type="checkbox"/> S Corp Effective _____	Corporate Telecommunications Company Enter amount from Form 500T, Line 7: _____ <div style="text-align: right;">.00</div> Noncorporate Telecommunications Company Check box and enter amount from Form 500T, Line 10: _____ <div style="text-align: right;">.00</div> Electric Supplier Company Enter amount from Sch. 500EL, Line 7 or 14: _____ <div style="text-align: right;">.00</div>
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Amended Return Complete Form 500 and Schedule 500ADJ. Attach an explanation of changes to income and modifications. DO NOT FILE THIS FORM TO CARRY BACK A NET OPERATING LOSS. File Form 500NOLD.	<input type="checkbox"/> Amended Return - Check here and other applicable boxes. <input type="checkbox"/> Federal Audit - Attach copy of IRS final determination. <input type="checkbox"/> Schedule 500A Changes <input type="checkbox"/> Schedule 500ADJ Changes	<input type="checkbox"/> Nonrefundable or Refundable Credit Change <input type="checkbox"/> Schedule 500AB Changes <input type="checkbox"/> Capital Loss Carryback <input type="checkbox"/> Other - Attach explanation.
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Questions and Related Information	
A Have you made any payments to an affiliated corporation, a related individual, or other related entity for interest, royalties or other expenses related to intangible property (patents, trademarks, copyrights and similar intangible property)? If yes, complete and attach Schedule 500AB. <div style="text-align: right;">Enter Exception amount from Schedule 500AB, Line 8 A _____ <div style="text-align: right;">.00</div> </div> B Coalfield Employment Enhancement Tax Credit earned from Form 306, Line 11. B _____ <div style="text-align: right;">.00</div> C If a net operating loss deduction was claimed in computing federal taxable income on the U.S. Corporation Income Tax Return, provide the requested information. If a NOL resulted from a merger, enter the FEIN of the company generating the NOL prior to the merger date. FEIN _____ (If there are NOLs for more than one year, attach a schedule for each year with the information requested in Section C.)	<div style="text-align: right;"> (1) Year of loss _____ (2) Federal NOL _____ (3) Percent of federal NOL used this year _____ % </div> D If Pass-Through Entity Withholding is claimed, enter the number of Schedule VK-1s and complete and attach Schedule 500ADJ, Page 2. D _____ E Has your federal income tax liability been redetermined with the IRS and finalized for any prior year(s) that has not previously been reported to the Department? If Yes, provide the year(s). E _____ <div style="text-align: right;"> Year _____ Year _____ Year _____ </div>
F Location of Corporation's books 4604 MARCIA CT., W ALEXANDRIA VA 22309 Contact for Corporation's books BILL MOCKOVAK Contact Phone Number 301-952-9437	

INTERNATIONAL FIELD DIRECTORS AND

2015 Virginia

Form 500

FEIN 54-1747813

Page 2



INCOME

1 Federal taxable income (from attached federal return)	1	-1,966.00
2 Total additions from Schedule 500ADJ, Section A, Line 7	2	.00
3 Total (add Lines 1 and 2)	3	-1,966.00
4 Total subtractions from Schedule 500ADJ, Section B, Line 10	4	500.00
5 Balance (subtract Line 4 from Line 3)	5	-2,466.00
6 Savings and Loan Association's Bad Debt Deduction (see Instructions)	6	.00
7 Virginia taxable income (subtract Line 6 from Line 5)	7	-2,466.00

TAX COMPUTATION

8 Multistate Corporation - If business conducted within and without Virginia (Multistate Corporation), attach Schedule 500A and complete Lines 8(a) through 8(d). If entire business conducted in Virginia, skip to Line 9.		
(a) Income subject to Virginia tax from Schedule 500A, Section B, Line 3(j)	8(a)	.00
(b) Apportionment factor percentage from Schedule 500A, Section B, Line 1 or Line 2(g)	8(b)	%
(c) Nonapportionable investment function income from Schedule 500A, Section B, Line 3(c)	8(c)	.00
(d) Nonapportionable investment function loss from Schedule 500A, Section B, Line 3(e)	8(d)	.00
9 Income tax [6% of Line 7 or 6% of Line 8(a)]	9	0.00

PAYMENTS AND CREDITS

10 Nonrefundable tax credits: Enter the amount from Schedule 500CR, Part XXXI, Line 139	10	0.00
11 Adjusted corporate tax (subtract Line 10 from Line 9)	11	0.00
12 2015 estimated Virginia income tax payments including overpayment credit from 2014	12	200.00
13 Extension payment	13	.00
14 Refundable tax credits from Schedule 500CR, Part XXXV, Line 147	14	.00
15 Pass-Through Entity total withholding from Schedule 500ADJ, Section D	15	.00
16 Total payments and credits (add Lines 12 through 15)	16	200.00

REFUND OR TAX DUE

17 Tax owed (if Line 11 is greater than Line 16, subtract Line 16 from Line 11)	17	.00
18 Penalty (see Instructions)	18	.00
19 Interest (see Instructions)	19	.00
20 Additional charge from Form 500C, Line 17 (attach Form 500C)	20	.00
21 Total due (add Lines 17 through 20)	21	.00
22 Overpayment (if Line 16 is greater than Line 11, subtract Line 11 from Line 16)	22	200.00
23 Amount to be credited to 2016 estimated tax	23	.00
24 Amount to be refunded (subtract Line 23 from Line 22)	24	200.00

I, the undersigned president, vice-president, treasurer, assistant treasurer, chief accounting officer, or other officer duly authorized to act on behalf of the corporation for which this return is made, declare under the penalties provided by law that this return (including any accompanying schedules and statements) has been examined by me and is, to the best of my knowledge and belief, a true, correct, and complete return, made in good faith, for the taxable year stated, pursuant to the income tax laws of the Commonwealth of Virginia. If prepared by a person other than the taxpayer, this declaration is based on all information of which he or she has any knowledge.

Date	Signature of Officer	Title TREASURER
Printed Name of Officer BILL MOCKOVAK	Phone Number 301-952-9437	
Print Preparer's Name and Firm Name BENJAMIN LUONGO, CPA	Individual of Firm, Signature of Preparer <i>Ryan Luongo</i>	Phone Number 301-952-9437
Date 03/28/16	Address of Preparer Luongo & Associates, PC, CPAs 6223 Crain Highway Upper Marlboro, MD 20772	
Preparer's FEIN, PTIN or SSN P00368001	Approved Vendor Code 1022	

2015 Virginia Schedule 500ADJ

Schedule of Adjustments



Name as shown on Virginia return INTERNATIONAL FIELD DIRECTORS AND FEIN 54-1747813

Section A - Additions to Federal Taxable Income

1. Fixed Date Conformity Addition (depreciation - see instructions)	1	_____	.00
2. Fixed Date Conformity Addition (other - see instructions)	2	_____	.00
3. Taxable Addition from Schedule 500AB, Line 10	3	_____	.00
4. Net Income tax and other taxes that are based on, measured by, or computed with reference to net income	4	_____	.00
5. Interest on state obligations other than Virginia	5	_____	.00
6. Other Additions to federal taxable income		Code	Amount
	6a	_____	.00
6a-6c Refer to instructions for the Other Addition Codes.	6b	_____	.00
	6c	_____	.00
7. Total Additions (Add Lines 1 - 5 and 6a - 6c. Enter here and on Form 500, Line 2.)	7	_____	.00

Section B - Subtractions from Federal Taxable Income

1. Fixed Date Conformity Subtraction (depreciation - see instructions)	1	_____	.00
2. Fixed Date Conformity Subtraction (other - see instructions)	2	_____	.00
3. Income from obligations or securities of the U.S. exempt from state income taxes, but not from federal income taxes	3	_____	.00
4. Foreign dividend gross-up (IRC § 78)	4	_____	.00
5. Refund or credit of income taxes included in federal taxable income	5	500	.00
6. Subpart F Income (IRC § 951)	6	_____	.00
7. Foreign source income subtraction allowed by Va. Code § 58.1-402 C 8. (see instructions for limitations)	7	_____	.00
8. Dividends received from corporations in which the recipient owns 50% or more of the voting stock, to the extent remaining in federal taxable income	8	_____	.00
9. Other Subtractions from federal taxable income		Code	Amount
	9a	_____	.00
9a-9c Refer to instructions for the Other Subtraction Codes.	9b	_____	.00
	9c	_____	.00
10. Total Subtractions (Add Lines 1 - 8 and 9a - 9c. Enter here and on Form 500, Line 4.)	10	500	.00

Section C - Amended Return

If you are filing an amended return, complete Section C to determine if you will receive an additional refund or if you need to make an additional payment.

1. Add amount paid with original return plus additional tax paid after it was filed (Do not include amount paid from Form 500, Line 20.)	1	_____	.00
2. Add Line 1 from above and Line 16 from Form 500 and enter the total here	2	_____	.00
3. Overpayment, if any, as shown on original return or as previously adjusted	3	_____	.00
4. Subtract Line 3 from Line 2	4	_____	.00
5. If Line 4 above is less than Line 11 on amended Form 500, subtract Line 4 above from Line 11 on amended Form 500. This is the Tax You Owe	5	_____	.00
6. Refund. If Line 11 on amended Form 500 is less than Line 4 above, subtract Line 11 on amended Form 500 from Line 4 above. This is the Tax You Overpaid.	6	_____	.00

Explanation of Changes to Income and Modifications

Attach explanation for amending return. Provide the line reference from the Form 500 for which a change is reported and give the reason for each change. Show any computation in detail and attach any applicable schedules.

Attach Schedule 500ADJ to Your Virginia Corporation Return, Form 500.

2015 Virginia Schedule 500FED

Schedule of Federal Line Items


Name as shown on Virginia return INTERNATIONAL FIELD DIRECTORS AND

FEIN 54-1747813

Form 1120, Deductions and Taxable Income

1. Domestic Production Activities Deduction	1	.00
2. Federal Taxable Income before NOL and Special Deductions	2	-1,966.00
3. Net Operating Loss Deduction	3	.00
4. Special Deductions	4	.00
5. Federal Taxable Income after NOL and Special Deductions	5	-1,966.00

Form 1120, Schedule C, Dividends and Special Deductions

6. Subpart F Income	6	.00
7. Foreign Dividend Gross-Up	7	.00

Form 1120, Schedule K or M - 3

8. Tax Exempt Interest	8	.00
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Form 5884

9. Salaries and Wages not deducted due to the WOTC	9	.00
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Form 4562, Special Depreciation Allowance and Other Depreciation

10. Special depreciation allowance for qualified property placed in service during the taxable year	10	.00
11. Property subject to 168(f)(1) election	11	.00
12. Other depreciation	12	.00

Form 1118, Schedule A, Income or Loss Before Adjustments - Gross Income or Loss

13. Total: Deemed Dividends (Exclude Gross-up)	13	.00
14. Total: Deemed Dividend (Gross-up)	14	.00
15. Total: Other Dividends (Exclude Gross-up)	15	.00
16. Total: Other Dividends (Gross-up)	16	.00
17. Total: Interest	17	.00
18. Total: Gross Rents, Royalties, and License Fees	18	.00
19. Total: Gross Income from Performance of Services	19	.00
20. Total: Other	20	.00
21. Total: Total Gross Income or Loss from Outside the U.S.	21	.00

Form 1118, Schedule A, Income or Loss Before Adjustments - Deductions

22. Total: Definitely Allocable - Rental, Royalty, and Licensing Expenses - Depreciation, Depletion, and Amortization	22	.00
23. Total: Definitely Allocable - Rental, Royalty, and Licensing Expenses - Other Expenses	23	.00
24. Total: Definitely Allocable - Expenses Related to Gross Income from Performance of Services	24	.00
25. Total: Definitely Allocable - Other Definitely Allocable Deductions	25	.00
26. Total: Total Definitely Allocable Deductions	26	.00
27. Total: Apportioned Share of Deductions not Definitely Allocable	27	.00
28. Total: Net Operating Loss Deduction	28	.00
29. Total: Total Deductions	29	.00

Form 1118, Schedule A, Income or Loss Before Adjustments - Total Income

30. Total: Total Income or (Loss) Before Adjustments	30	.00
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Attach Schedule 500FED to Your Virginia Corporation Return, Form 500.

Schedule 500FED does not replace the requirement to attach a complete federal Form 1120 to your Virginia return.

General Footnote

TAXPAYER RECEIVED EXEMPT STATUS EFFECTIVE 3/17/2015.

FUTURE TAX RETURNS WILL BE FILED ON 990 FORMS.

FOR BOOKKEEPING PURPOSES OF 2015:

FORM 1120 INCLUDES JAN 1, 2015 - MARCH 31, 2015.

FORM 990EZ INCLUDES APRIL 1, 2015 - DECEMBER 31, 2015.

VA Electronic Filing - PDF Attachment Worksheet

Form **500 / 502**

2015

For tax year beginning , ending

Name

Employer Identification Number

INTERNATIONAL FIELD DIRECTORS AND

54-1747813

Title	Attachment Source	Proforma
<p>MANUALLY ATTACHED TO RETURN IRS FINAL DETERMINATION</p> <p>AUTOMATICALLY ATTACHED TO RETURN REQUIREDSTATEMENTS</p> <p>GENERALFOOTNOTE</p>	<p>H:\LUONGO FIRM FILES\CLIENT FILES\BUSINESS CLIENTS\CLIENTS E - K\INTERNATIONAL FIELD DIRECTORS AND TECHNOLOGIES CONFERENCE INC\PERMANENT FILES\2015 990 FINAL DETERMINATION LETTER - INTERNATIONAL FIELD DIRECTORS AND TECH CONF</p> <p>REQUIREDSTATEMENTS.PDF</p> <p>GENERALFOOTNOTE.PDF</p>	

Form **7004**

(Rev. December 2012)

Department of the Treasury
Internal Revenue Service

Application for Automatic Extension of Time To File Certain Business Income Tax, Information, and Other Returns

► File a separate application for each return.

► Information about Form 7004 and its separate instructions is at www.irs.gov/form7004.

OMB No. 1545-0233

Print
or
Type

Name

**INTERNATIONAL FIELD DIRECTORS AND
TECHNOLOGIES CONFERENCE INCORPORATE**

Identifying number

54-1747813

Number, street, and room or suite no. (If P.O. box, see instructions.)

4604 MARCIA CT. W

City, town, state, and ZIP code (If a foreign address, enter city, province or state, and country (follow the country's practice for entering postal code)).

ALEXANDRIA

VA 22309

Note. File request for extension by the due date of the return for which the extension is granted. See instructions before completing this form.

Part I Automatic 5-Month Extension

1a Enter the form code for the return that this application is for (see below)

Application Is For:	Form Code	Application Is For:	Form Code
Form 1065	09	Form 1041 (estate other than a bankruptcy estate)	04
Form 8804	31	Form 1041 (trust)	05

Part II Automatic 6-Month Extension

b Enter the form code for the return that this application is for (see below)

12

Application Is For:	Form Code	Application Is For:	Form Code
Form 706-GS(D)	01	Form 1120-ND (section 4951 taxes)	20
Form 706-GS(T)	02	Form 1120-PC	21
Form 1041 (bankruptcy estate only)	03	Form 1120-POL	22
Form 1041-N	06	Form 1120-REIT	23
Form 1041-QFT	07	Form 1120-RIC	24
Form 1042	08	Form 1120S	25
Form 1065-B	10	Form 1120-SF	26
Form 1066	11	Form 3520-A	27
Form 1120	12	Form 8612	28
Form 1120-C	34	Form 8613	29
Form 1120-F	15	Form 8725	30
Form 1120-FSC	16	Form 8831	32
Form 1120-H	17	Form 8876	33
Form 1120-L	18	Form 8924	35
Form 1120-ND	19	Form 8928	36

2 If the organization is a foreign corporation that does not have an office or place of business in the United States, check here ☐

3 If the organization is a corporation and is the common parent of a group that intends to file a consolidated return, check here ☐

If checked, attach a statement, listing the name, address, and Employer Identification Number (EIN) for each member covered by this application.

Part III All Filers Must Complete This Part

4 If the organization is a corporation or partnership that qualifies under Regulations section 1.6081-5, check here ☐

5a The application is for calendar year **2015**, or tax year beginning , and ending

b Short tax year. If this tax year is less than 12 months, check the reason: ☐ Initial return ☐ Final return
☐ Change in accounting period ☐ Consolidated return to be filed ☐ Other (see instructions-attach explanation)

6 Tentative total tax	6	0
7 Total payments and credits (see instructions)	7	500
8 Balance due. Subtract line 7 from line 6 (see instructions)	8	0

For Privacy Act and Paperwork Reduction Act Notice, see separate Instructions.

Form **7004** (Rev. 12-2012)