Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

For	· calen	idar year 2021 or tax year be	ginning	, 20	21, and	ending		, 20
Nam	ne of fou	ndation				A Employe	er identification numb	er
Num	nber and	street (or P.O. box number if mail is n	ot delivered to street address)	Roo	om/suite	B Telephor	ne number (see instruc	tions)
City	or town,	, state or province, country, and ZIP or	foreign postal code	·		C If exemp	tion application is pend	ding, check here ►
G	Check	all that apply: Initial ret	urn 🔲 Initial return	of a former publ	ic charity	D 1. Foreig	n organizations, check	here ▶ □
		☐ Final retu		return		2 Foreig	n organizations meetin	mathe 85% test
		☐ Address	change 🔲 Name char	nge			here and attach comp	
		k type of organization: Son 4947(a)(1) nonexempt chari					foundation status was 507(b)(1)(A), check here	
<u> </u>		narket value of all assets at	J Accounting method	•				_
•		f year (from Part II, col. (c),	Othor (oncoit)				indation is in a 60-mon ction 507(b)(1)(B), chec	
	line 16		(Part I, column (d), must be	e on cash basis)				
P	art I	•		·				(d) Disbursements
		amounts in columns (b), (c), and (d) the amounts in column (a) (see inst	may not necessarily equal	(a) Revenue and expenses per books		investment ncome	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc.,	received (attach schedule)					
	2	Check ► ☐ if the foundation is	not required to attach Sch. B					
	3	Interest on savings and temp	orary cash investments					
	4	Dividends and interest from	securities					
	5a	Gross rents						
	b	Net rental income or (loss)						
<u>e</u>	6a	Net gain or (loss) from sale o	f assets not on line 10					
en	b	Gross sales price for all assets or	n line 6a					
Revenue	7	Capital gain net income (fror	·					
Œ	8	Net short-term capital gain						
	9							
	10a	Gross sales less returns and allo						
	b	Less: Cost of goods sold						
	, C	Gross profit or (loss) (attach	·					
	11	Other income (attach schedu						
_	12	Total. Add lines 1 through 1						
S	13	Compensation of officers, di						
cpenses	14	Other employee salaries and	•					
be	15 16a	Pension plans, employee be Legal fees (attach schedule)						
	b	Accounting fees (attach sche						
Ve	C	Other professional fees (atta						<u> </u>
ati	17	Interest	•					
str	18	Taxes (attach schedule) (see						
Ξ	19	Depreciation (attach schedul	· ·					
ф	20	Occupancy	-					
٧	21	Travel, conferences, and me						
JIE	22	Printing and publications	_					
<u> </u>	23	Other expenses (attach sche						
Operating and Administrative E	24	Total operating and adn Add lines 13 through 23.						
þe	25	Contributions, gifts, grants p	aid					
O	26	Total expenses and disbursen		_				
	27	Subtract line 26 from line 12						
	a	Excess of revenue over expe	nses and disbursements					
	b	Net investment income (if r	egative, enter -0-) .					
	C	Adjusted net income (if neo	ative. enter -0-)					

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	En	d of year
		should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	.,		
	2	Savings and temporary cash investments			
	3	A security reading let s			
		Less: allowance for doubtful accounts ▶			
	4	Dladges reseivable			
	•	Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	Ū	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less: allowance for doubtful accounts ▶			
)ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ä	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)			
	17	Accounts payable and accrued expenses			
4.	18	Grants payable			
ies	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
aþ	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶)			
	23	Total liabilities (add lines 17 through 22)			
S		Foundations that follow FASB ASC 958, check here			
S		and complete lines 24, 25, 29, and 30.			
lar	24	Net assets without donor restrictions			
Ва	25	Net assets with donor restrictions			
Net Assets or Fund Balances		Foundations that do not follow FASB ASC 958, check here ▶ □			
<u>.</u>		and complete lines 26 through 30.			
ır	26	Capital stock, trust principal, or current funds			
SC	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
set	28	Retained earnings, accumulated income, endowment, or other funds			
AS!	29	Total net assets or fund balances (see instructions)			
<u>بر</u> ا	30	Total liabilities and net assets/fund balances (see			
		instructions)			
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
1		I net assets or fund balances at beginning of year-Part II, colu			
		of-year figure reported on prior year's return)			1
2	Ente	r amount from Part I, line 27a 		<u>L</u> i	2
3	Othe	er increases not included in line 2 (itemize) ▶			3
4	Add	lines 1, 2, and 3		<u>L</u> '	4
5	Decr	reases not included in line 2 (itemize)			5
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5)-I	Part II, column (b), Iin	e 29 (6

Form 990-PF (2021)

i Oiiii 33	10-11 (2021)					rage G
Part	V Capital Gains an	d Losses for Tax on Invest	ment Income			
		ind(s) of property sold (for example, real use; or common stock, 200 shs. MLC Co		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a						
b						
С						
d						
е			Т			
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		ain or (loss) s (f) minus (g))
а						
b						
С						
d						
е						
	Complete only for assets she	owing gain in column (h) and owned	d by the foundation	on 12/31/69.		ol. (h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	1 ' '	s of col. (i) (j), if any		ot less than -0-) or (from col. (h))
а						
b						
С						
d						
е						
2	Capital gain net income of) HIEL CADIIAI 10551 - {	i, also enter in Pa s), enter -0- in Par	,	2	
3	Net short-term capital ga	in or (loss) as defined in section	ns 1222(5) and (6)	•		
	If gain, also enter in Part	t I, line 8, column (c). See instr	ructions. If (loss)	, enter -0- in }		
	Part I, line 8			<u> J</u>	3	
Part	V Excise Tax Base	d on Investment Income (S	ection 4940(a)	, 4940(b), or 49	948-see instr	uctions)
1a	Exempt operating foundation	ons described in section 4940(d)(2)				
	Date of ruling or determinat		n copy of letter if r			1
b		dations enter 1.39% (0.0139) o				
	enter 4% (0.04) of Part I,	line 12, col. (b)			· · · /	
2	Tax under section 511 (do	mestic section 4947(a)(1) trusts	and taxable found	dations only; othe	ers, enter -0-)	2
3	Add lines 1 and 2					3
4	Subtitle A (income) tax (do	omestic section 4947(a)(1) trusts	and taxable found	dations only; othe	ers, enter -0-)	4
5	Tax based on investmen	nt income. Subtract line 4 from	line 3. If zero or I	ess, enter -0		5
6	Credits/Payments:					
а	2021 estimated tax paym	ents and 2020 overpayment cr	edited to 2021	6a		
b	Exempt foreign organizat	ions-tax withheld at source .		6b		
С	Tax paid with application	for extension of time to file (Fo	rm 8868)	6с		
d	Backup withholding error	neously withheld		6d		
7	Total credits and paymer	nts. Add lines 6a through 6d .				7
8	Enter any penalty for und	derpayment of estimated tax. C	heck here 🗌 if F	orm 2220 is atta	ched	8
9	Tax due. If the total of lin	es 5 and 8 is more than line 7,	enter amount ow	red	▶	9
10	Overpayment. If line 7 is	more than the total of lines 5 a	nd 8, enter the ar	nount overpaid	•	10
11	Enter the amount of line 10	to be: Credited to 2022 estim a	ited tax ►	R	efunded 🕨 📑	11

1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition if the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. Did the foundation (if any) of tax on political expenditures (section 4955) imposed during the year. (1) On the foundation managers. ▶ \$ Enter the amount (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation have any observable of the last of the changes. If "Yes," attach a detailed description of the activities. By late the roundation and any changes, not previously preported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes. If "Yes," has it filed a tax return on Form 990-T for this year? If "Yes," attach the statement required by <i>General instruction</i> of the pression and the pre	Part	VI-A Statements Regarding Activities			
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b If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction 7. Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV Enter the states to which the foundation reports or with which it is registered. See instructions. ▶ If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation By If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation By If the foundation claiming status as a private operating foundation within the meaning of section 4942(i)(3) or apar2(i)(3) for calendar year 2021 or the tax year beginning in 2021? See the instructions for Part XIII. If "Yes," or complete Part XIII. At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions Telephone no. Located			<u> </u>		
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See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of	16			Yes	No
			16		
the foreign country ▶		· · · · · · · · · · · · · · · · · · ·			
		the foreign country ▶			

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year, did the foundation (either directly) or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) b If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions. c Organizations relying on a current notice regarding disaster assistance? See instructions. d Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2021? 1a(5) 1a(6) 1a(7) 1a(7) 1a(8) 1a(8) 1a(9) 1
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c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.
▶ 20 , 20 , 20 , 20
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time
during the year?
b If "Yes," did it have excess business holdings in 2021 as a result of (1) any purchase by the foundation or
disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the
Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of
the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the
foundation had excess business holdings in 2021.)
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its
charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2021? 4b

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Par	VI-B Statements Regarding Activities			4/20 l	viay Be R	equire	ea (continued)			
5a	During the year, did the foundation pay or incur	any am	ount to:						Yes	No
	(1) Carry on propaganda, or otherwise attempt t	o influe	nce legislatio	n (sect	ion 4945(e))? .		5a(1)		
	(2) Influence the outcome of any specific pub	olic elec	ction (see se	ection 4	1955); or t	o carry	on, directly or			
	indirectly, any voter registration drive?							5a(2)		
	(3) Provide a grant to an individual for travel, stu	dv ord	other similar r	ournose	25?			5a(3)		
	(4) Provide a grant to an organization other than							52(5)		
	(4)(A)? See instructions			-		11000 111	500tion 1010(a)	E0(4)		
	. , . ,							5a(4)		
	(5) Provide for any purpose other than religious,									
_	the prevention of cruelty to children or anima							5a(5)		
b	If any answer is "Yes" to 5a(1)-(5), did any of the				•					
	in Regulations section 53.4945 or in a current no	tice reg	garding disas	ter assi	stance? Se	ee instr	uctions	5b		
С	Organizations relying on a current notice regardi	ng disa	ster assistan	ce, che	ck here .		▶□			
d	If the answer is "Yes" to question 5a(4), does	-				om the	tax because it			
	maintained expenditure responsibility for the gra							5d		
								Ju		
6-	If "Yes," attach the statement required by Regula									
ьа	Did the foundation, during the year, receive any	tunas,	airectly or in	nairecti	y, to pay p	remium	is on a personai			
	benefit contract?							6a		
b	Did the foundation, during the year, pay premiun	ns, dire	ctly or indired	ctly, on	a personal	benefi ⁻	t contract? .	6b		
	If "Yes" to 6b, file Form 8870.									
7a	At any time during the tax year, was the foundation	a party	to a prohibite	ed tax s	helter trans	action?		7a		
b	If "Yes," did the foundation receive any proceed		•					7b		
8	Is the foundation subject to the section 4960 tax									
•	excess parachute payment(s) during the year?.							8		
Dar	Information About Officers, Direct								206	
гаі		tors, i	rusices, ri	Juliua	lion iviani	ayers,	mignily Faid Li	пріоу	ces,	
_	and Contractors			دا د داد اد		-4: (\ i			
	List all officers, directors, trustees, and found							•		
	(a) Name and address		e, and average rs per week	`´(lf n	npensation ot paid,		Contributions to byee benefit plans	(e) Expe	nse aco allowan	
		devote	ed to position	en	ter -0-) ´	and def	erred compensation	Otiliei a	allowall	
										enter
2	Compensation of five highest-paid employed	es (oth	er than thos	se inclu	ıded on li	ne 1—	see instructions	s). If no	one, o	
2	Compensation of five highest-paid employee "NONE."	es (oth	er than thos	se inclu	ıded on li	ne 1–	see instructions	s). If no	one, o	
2		es (oth			uded on li	ne 1-	(d) Contributions to			
			(b) Title, and a	iverage veek	(c) Compe		(d) Contributions to employee benefit	(e) Expe	nse acc	
	"NONE."		(b) Title, and a	iverage veek			(d) Contributions to	(e) Expe		
	"NONE."		(b) Title, and a	iverage veek			(d) Contributions to employee benefit plans and deferred	(e) Expe	nse acc	
	"NONE."		(b) Title, and a	iverage veek			(d) Contributions to employee benefit plans and deferred	(e) Expe	nse acc	
	"NONE."		(b) Title, and a	iverage veek			(d) Contributions to employee benefit plans and deferred	(e) Expe	nse acc	
	"NONE."		(b) Title, and a	iverage veek			(d) Contributions to employee benefit plans and deferred	(e) Expe	nse acc	
	"NONE."		(b) Title, and a	iverage veek			(d) Contributions to employee benefit plans and deferred	(e) Expe	nse acc	
	"NONE."		(b) Title, and a	iverage veek			(d) Contributions to employee benefit plans and deferred	(e) Expe	nse acc	
	"NONE."		(b) Title, and a	iverage veek			(d) Contributions to employee benefit plans and deferred	(e) Expe	nse acc	
	"NONE."		(b) Title, and a	iverage veek			(d) Contributions to employee benefit plans and deferred	(e) Expe	nse acc	

Total number of other employees paid over \$50,000

Part VII Information About Officers, Directors, Trustees, Found Contractors (continued)	oundation Managers, Highly Paid En	nployees,
3 Five highest-paid independent contractors for professional servi	ces. See instructions. If none, enter "NON	E."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services	········	
Part VIII-A Summary of Direct Charitable Activities		•
List the foundation's four largest direct charitable activities during the tax year. Include re organizations and other beneficiaries served, conferences convened, research papers proc		Expenses
1		
2		
3		
4		
Part VIII-B Summary of Program-Related Investments (see i	nstructions)	
Describe the two largest program-related investments made by the foundation during the t	ax year on lines 1 and 2.	Amount
1		
2		
All other program-related investments. See instructions. 3		
Total Add lines 1 through 3		

Part	Minimum Investment Return (All domestic foundations must complete this part. Forei	gn fo	undations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see		
	instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	
6	Minimum investment return. Enter 5% (0.05) of line 5	6	
Part		ounda	ations
	and certain foreign organizations, check here ► □ and do not complete this part.)		
1	Minimum investment return from Part IX, line 6	1	
2 a	Tax on investment income for 2021 from Part V, line 5		
b	Income tax for 2021. (This does not include the tax from Part V.) 2b		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII,		
	line 1	7	
	XI Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	
b	Program-related investments—total from Part VIII-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
_	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4	4	

Form **990-PF** (2021)

Part	XII Undistributed Income (see instruction	ons)			
	·	(a) Corpus	(b) Years prior to 2020	(c) 2020	(d) 2021
1 2	Distributable amount for 2021 from Part X, line 7 Undistributed income, if any, as of the end of 2021:				
а	Enter amount for 2020 only				
b	Total for prior years: 20, 20, 20				
3	Excess distributions carryover, if any, to 2021:				
a	From 2016				
b	From 2017				
d	From 2019				
e	From 2020				
f	Total of lines 3a through e				
4	Qualifying distributions for 2021 from Part XI, line 4: ▶ \$				
a	Applied to 2020, but not more than line 2a .				
b	Applied to undistributed income of prior years (Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2021 distributable amount				
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2021				
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
a b	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 Prior years' undistributed income. Subtract line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable amount—see instructions				
е	Undistributed income for 2020. Subtract line 4a from line 2a. Taxable amount—see instructions				
f	Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2022				
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)				
8	Excess distributions carryover from 2016 not applied on line 5 or line 7 (see instructions) .				
9	Excess distributions carryover to 2022. Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:				
а	Excess from 2017				
b	Excess from 2018				
C C	Excess from 2019				
d e	Excess from 2020 Excess from 2021				
_					

Page 9

Form 99	90-PF (2021)					Page 10
Part)	
1a	If the foundation has received a ruling					
h	foundation, and the ruling is effective for		=			2) 0 1 1040(:)/E
b 2a	Check box to indicate whether the four Enter the lesser of the adjusted net	Tax year	operating founda	Prior 3 years	ection <u></u> 4942()(C	3) or 4942(j)(5
Lu	income from Part I or the minimum investment return from Part IX for each year listed	(a) 2021	(b) 2020	(c) 2019	(d) 2018	(e) Total
b	85% (0.85) of line 2a					
C	Qualifying distributions from Part XI, line 4, for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test - enter:					
	(1) Value of all assets(2) Value of assets qualifying under continuous 40.42(i)(2)(P)(i)					
b	section 4942(j)(3)(B)(i)					
С	"Support" alternative test—enter:					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income	(0 1 1 1		<u> </u>		
Part				he foundation h	ad \$5,000 or mo	ore in assets at
1	any time during the year- Information Regarding Foundation		15.)			
a	List any managers of the foundation of before the close of any tax year (but of	who have contribu				by the foundation
b	List any managers of the foundation ownership of a partnership or other en					ge portion of the
2	Information Regarding Contribution Check here ▶ ☐ if the foundation unsolicited requests for funds. If the foundation complete items 2a, b, c, and d. See in	only makes contr oundation makes	ibutions to prese	elected charitable		
а	The name, address, and telephone nu		dress of the perso	n to whom applica	tions should be ad	dressed:
b	The form in which applications should	l be submitted and	d information and	materials they sho	uld include:	
С	Any submission deadlines:					
d	Any restrictions or limitations on aw factors:	vards, such as by	y geographical a	reas, charitable fi	elds, kinds of inst	itutions, or other

Part	XIV Supplementary Information (cont.	inued)		_	
3	Grants and Contributions Paid During t		ed for Fut	ture Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient	Commission	
а	Paid during the year				
	T				
	Total	<u> </u>	 I	▶ 3a	a
b	Approved for future payment				
	Total			> 31	o

Pa	rt XV	V-A Analysis of Income-Producing Ac	ctivities				
Ente	r gro	ss amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by secti	on 512, 513, or 514	(e)
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
1	Prog	gram service revenue:					(Occ matractions.)
	а						
	b .						
	C						
	d _						
	е						
	f						
	-	Fees and contracts from government agencies					
2		mbership dues and assessments					
3		rest on savings and temporary cash investments					
4		dends and interest from securities					
5		rental income or (loss) from real estate:					
		Debt-financed property					
		Not debt-financed property					
6		rental income or (loss) from personal property					
7		er investment income					
8		n or (loss) from sales of assets other than inventory					
9		income or (loss) from special events					
10		ss profit or (loss) from sales of inventory					
11	_	er revenue: a					
	b .						
	d ₋						
40	e	habel Adel a discourse (la) (el) a sel (e)					
	ธมก	ototal. Add columns (b). (d). and (e)					
12		1 4 1 1 1 40 1 40 1 40 1 40				40	
		ototal. Add columns (b), (d), and (e)				13	
(See	worl	ksheet in line 13 instructions to verify calculatior	ıs.)			13	
(See	worl	ksheet in line 13 instructions to verify calculation V-B Relationship of Activities to the A	ıs.) .ccomplishm	ent of Exemp	ot Purposes		
(See	work www. ww. www. www. www. www. www. www. www. www. www. www. w	ksheet in line 13 instructions to verify calculation V-B Relationship of Activities to the A	ıs.) .ccomplishm	ent of Exemp	ot Purposes		e accomplishment
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Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt

		Organization	ons										
	in se	ction 501(c) (o	directly or indirectly er ther than section 5									Yes	No
	_	izations?											
		· ·	porting foundation to								4 (4)		
											1a(1)		
	٠,										1a(2)		
		transactions:									41.74		
			a noncharitable exen								1b(1)		
			ets from a noncharitat								1b(2)		
			, equipment, or other								1b(3)		
			rrangements								1b(4) 1b(5)		
			rantees ervices or membership							•	1b(5)		
			quipment, mailing list								1c		
			of the above is "Yes,									fair m	l arket
			ther assets, or service										
			on or sharing arrange										
(a) Line		b) Amount involved		ritable exempt organiza			otion of transfe						
-													
	descr	ibed in section 5	ectly or indirectly affi 501(c) (other than sec a following schedule.	tion 501(c)(3)) or in	section (□ Ye	es 🗆] No
	10	(a) Name of organ		(b) Type of o				(c) Des	cription	of relati	onship		
		(a) Hame of organi		(2) - , , p = 0. 0	- gam <u>-</u> anon			(-,					
-													
-													
_			declare that I have examined						est of r	ny knowle	edge and	belief, it	is true,
Sign Here	' \			an taxpayer) is based on all information of which prepare			May the IRS discuss this ret with the preparer shown belo				elow?		
		ature of officer or trus	stee	Date Title					— [See instr	uctions.	∐Yes	∐No
Paid	'	Print/Type preparer	's name	Preparer's signature			Date		Check	☐ if	PTIN		
Prepa	arer									nployed			
Use C		Firm's name ►						Firm's	EIN ▶				
	Firm's address >							Phone	no.				
		Titil 5 address F											

Name of the organization	Employer identification number

Grants and Contributions Paid During the Year - Cash

Name of the Organization REAL LIFE MINISTRIES

Employer identification number 91-2110673

Part XIV - Line 3(a) - Paid During the Year

Entry#	Name	Address	Foundation status	Amount			
1	EQUIPNET	PO BOX 860,ALAMO,CA 94507	NC	3850.00			
MISSIONARIES TO PHILIPPINES							
2	JOHN STEPHENSON	71 DESOLATION ROAD,STEVENSON,WA 98648	I	3400.00			
MISSIONARY WORK IN TAWAIN							
3	MZUZU CRISIS NURSERY	PLOT 785 CHIMALIRO ROAD,EAST CHASEFUL, PO BOX 395,MZUZU,MALAWI, MI 00000	N/A	10000.00			
CRISIS NURSERY THAT TAKES IN AT-RISK BABIES TO ENSURE SURVIVAL							
4	ST VINCENT VOLCANO RELIEF	6993 COBBLE CREEK DRIVE, COLORADO SPRINGS, CO 80922	NC	10100.00			
EMERGENCY, DESIGNATED AID RELIEF FOR VOLCANO RELIEF FOR ST. VINCENT AND THE GRENADINES SENT TO ON-SITE MINISTRY AND AID WORKERS.							

Name of the organization	Employer identification number

Name of the organization	Employer identification number

Name of the organization	Employer identification number

Name of the organization	Employer identification number

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

2021

Employer identification number

Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation ☐ 527 political organization Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line

2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			