# **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.

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| FOI                  | ' calen   | idar year 2020 or tax year be                                                                       | ginning                         |                                    | , 2020, and    | ending                |                                                   | , 20                                                                 |
|----------------------|-----------|-----------------------------------------------------------------------------------------------------|---------------------------------|------------------------------------|----------------|-----------------------|---------------------------------------------------|----------------------------------------------------------------------|
|                      | ne of fou |                                                                                                     |                                 |                                    |                |                       | er identification numb                            |                                                                      |
| Num                  | nber and  | I street (or P.O. box number if mail is no                                                          | ot delivered to street address) |                                    | Room/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 pen                           | ding, check here ▶ □                                                 |
| G                    | Check     | k all that apply: 🔲 Initial retu                                                                    | urn 🗌 Initial return            | of a former p                      | oublic charity | <b>D</b> 1. Foreig    | n organizations, check                            | chere ▶                                                              |
|                      |           | Final retu                                                                                          |                                 |                                    |                | 2. Foreig             | ın organizations meetir                           | ng the 85% test,                                                     |
|                      |           | Address                                                                                             |                                 |                                    |                | check                 | here and attach comp                              | outation · · •                                                       |
|                      |           | k type of organization:                                                                             |                                 |                                    |                |                       | foundation status was<br>507(b)(1)(A), check here |                                                                      |
| Ī                    | Fair m    | narket value of all assets at                                                                       | J Accounting method             | : Cash                             | Accrual        | F If the fou          | ındation is in a 60-mon                           | th termination                                                       |
|                      |           | f year (from Part II, col. (c),                                                                     | Other (specify)                 |                                    |                |                       | ction 507(b)(1)(B), ched                          |                                                                      |
|                      |           | 6) ▶ \$                                                                                             | (Part I, column (d), must be    | e on cash basi                     | s.)            |                       |                                                   |                                                                      |
| P                    | art I     | Analysis of Revenue and Examounts in columns (b), (c), and (d) the amounts in column (a) (see instr | may not necessarily equal       | (a) Revenue<br>expenses p<br>books | er (b) ive     | t investment<br>ncome | (c) Adjusted net income                           | (d) Disbursements<br>for charitable<br>purposes<br>(cash basis only) |
|                      | 1         | Contributions, gifts, grants, etc.,                                                                 | received (attach schedule)      |                                    |                |                       |                                                   |                                                                      |
|                      | 2         | Check ► ☐ if the foundation is r                                                                    | not required to attach Sch. B   |                                    |                |                       |                                                   |                                                                      |
|                      | 3         | Interest on savings and temp                                                                        | orary cash investments          |                                    |                |                       |                                                   |                                                                      |
|                      | 4         | Dividends and interest from s                                                                       |                                 |                                    |                |                       |                                                   |                                                                      |
|                      | 5a        | Gross rents                                                                                         |                                 |                                    |                |                       |                                                   |                                                                      |
|                      | b         | Net rental income or (loss)                                                                         |                                 |                                    |                |                       |                                                   |                                                                      |
| ne                   | 6a        | Net gain or (loss) from sale of                                                                     |                                 |                                    |                |                       |                                                   |                                                                      |
| en                   | _ b       | Gross sales price for all assets or                                                                 |                                 |                                    |                |                       |                                                   |                                                                      |
| Revenue              | 7         | Capital gain net income (from                                                                       | •                               |                                    |                |                       |                                                   |                                                                      |
| -                    | 8         | Net short-term capital gain .                                                                       |                                 |                                    |                |                       |                                                   |                                                                      |
|                      | 9         | Income modifications Gross sales less returns and allo                                              |                                 |                                    |                |                       |                                                   |                                                                      |
|                      | 10a<br>b  | Less: Cost of goods sold .                                                                          |                                 |                                    |                |                       |                                                   |                                                                      |
|                      | C         | Gross profit or (loss) (attach s                                                                    |                                 |                                    |                |                       |                                                   |                                                                      |
|                      | 11        | Other income (attach schedu                                                                         | ·                               |                                    |                |                       |                                                   |                                                                      |
|                      | 12        | Total. Add lines 1 through 11                                                                       |                                 |                                    |                |                       |                                                   |                                                                      |
| <b>'</b> 0           | 13        | Compensation of officers, dir                                                                       |                                 |                                    |                |                       |                                                   |                                                                      |
| cpenses              | 14        | Other employee salaries and                                                                         | wages                           |                                    |                |                       |                                                   |                                                                      |
| en                   | 15        | Pension plans, employee ber                                                                         | nefits                          |                                    |                |                       |                                                   |                                                                      |
|                      | 16a       | Legal fees (attach schedule)                                                                        |                                 |                                    |                |                       |                                                   |                                                                      |
| e)<br>LEI            | b         | Accounting fees (attach sche                                                                        | -                               |                                    |                |                       |                                                   |                                                                      |
| ţį                   | С         | Other professional fees (attack                                                                     | •                               |                                    |                |                       |                                                   |                                                                      |
| and Administrative E | 17        |                                                                                                     |                                 |                                    |                |                       | 1                                                 |                                                                      |
| nis                  | 18        | Taxes (attach schedule) (see                                                                        |                                 |                                    |                |                       |                                                   |                                                                      |
| Ē                    | 19        | Depreciation (attach schedule                                                                       |                                 |                                    |                |                       |                                                   |                                                                      |
| Ad                   | 20        | Occupancy                                                                                           |                                 |                                    |                |                       | 1                                                 |                                                                      |
| Б                    | 21<br>22  | Travel, conferences, and mee                                                                        |                                 |                                    |                |                       |                                                   |                                                                      |
| ā                    | 23        | Printing and publications . Other expenses (attach sche                                             |                                 |                                    |                |                       |                                                   |                                                                      |
| ing                  | 24        | Total operating and adm                                                                             | -                               |                                    |                |                       |                                                   |                                                                      |
| Operating            |           | Add lines 13 through 23                                                                             |                                 |                                    |                |                       |                                                   |                                                                      |
| Č                    | 25        | Contributions, gifts, grants pa                                                                     |                                 |                                    |                |                       |                                                   |                                                                      |
| _                    | 26        | Total expenses and disbursem                                                                        |                                 |                                    |                |                       |                                                   |                                                                      |
|                      | 27        | Subtract line 26 from line 12:                                                                      |                                 |                                    |                |                       |                                                   |                                                                      |
|                      | a         | Excess of revenue over exper                                                                        |                                 |                                    |                |                       |                                                   |                                                                      |
|                      | b         | Net investment income (if n                                                                         | -                               |                                    |                |                       |                                                   |                                                                      |
|                      | C         | Adjusted net income (if nea                                                                         | auve, enter -U-)                |                                    |                |                       |                                                   |                                                                      |

| 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      | Accounts receivable ▶                                                                                          |                         |                |                       |
|                             |        | Less: allowance for doubtful accounts ▶                                                                        |                         |                |                       |
|                             | 4      | Pladasa rassiyabla                                                                                             |                         |                |                       |
|                             |        | Less: allowance for doubtful accounts ▶                                                                        |                         |                |                       |
|                             | 5      | Grants receivable                                                                                              |                         |                |                       |
|                             | 6      | Receivables due from officers, directors, trustees, and other                                                  |                         |                |                       |
|                             |        | 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                                                                          |                         |                |                       |
| As                          | 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     | <b>Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I)             |                         |                |                       |
|                             | 17     | Accounts payable and accrued expenses                                                                          |                         |                |                       |
| S                           | 18     | Grants payable                                                                                                 |                         |                |                       |
| ţie                         | 19     | Deferred revenue                                                                                               |                         |                |                       |
| Liabilities                 | 20     | Loans from officers, directors, trustees, and other disqualified persons                                       |                         |                |                       |
| ia                          | 21     | Mortgages and other notes payable (attach schedule)                                                            |                         |                |                       |
| _                           | 22     | Other liabilities (describe ►)                                                                                 |                         |                |                       |
|                             | 23     | Total liabilities (add lines 17 through 22)                                                                    |                         |                |                       |
| es                          |        | Foundations that follow FASB ASC 958, check here $ ightharpoons$                                               |                         |                |                       |
| nÇ                          |        | and complete lines 24, 25, 29, and 30.                                                                         |                         |                |                       |
| la                          | 24     | Net assets without donor restrictions                                                                          |                         |                |                       |
| B                           | 25     | Net assets with donor restrictions                                                                             |                         |                |                       |
| nd                          |        | Foundations that do not follow FASB ASC 958, check here ▶ □                                                    |                         |                |                       |
| Fu                          |        | and complete lines 26 through 30.                                                                              |                         |                |                       |
| or                          | 26     | Capital stock, trust principal, or current funds                                                               |                         |                |                       |
| ts (                        | 27     | Paid-in or capital surplus, or land, bldg., and equipment fund                                                 |                         |                |                       |
| se                          | 28     | Retained earnings, accumulated income, endowment, or other funds                                               |                         |                |                       |
| As                          | 29     | Total net assets or fund balances (see instructions)                                                           |                         |                |                       |
| Net Assets or Fund Balances | 30     | Total liabilities and net assets/fund balances (see                                                            |                         |                |                       |
|                             |        | instructions)                                                                                                  |                         |                |                       |
|                             | rt III | Analysis of Changes in Net Assets or Fund Balances                                                             | ( ) !! ( )              |                |                       |
| 1                           |        | I net assets or fund balances at beginning of year—Part II, colur                                              |                         |                |                       |
| ^                           |        | of-year figure reported on prior year's return)                                                                |                         |                |                       |
| 2                           | Ente   | er amount from Part I, line 27a                                                                                |                         | 2              |                       |
| 3                           | Otne   | er increases not included in line 2 (itemize)                                                                  |                         |                |                       |
| 4                           |        | lines 1, 2, and 3                                                                                              |                         |                |                       |
| 5<br>6                      |        | reases not included in line 2 (itemize)   I net assets or fund balances at end of year (line 4 minus line 5)—F | Part II column (b) line |                |                       |
| J                           | · Ota  |                                                                                                                | a, oo.a (b), IIII       |                | '                     |

| Part I | art IV Capital Gains and Losses for Tax on Investment Income |                                                                                        |                                     |                                        |                                   |                                               |  |
|--------|--------------------------------------------------------------|----------------------------------------------------------------------------------------|-------------------------------------|----------------------------------------|-----------------------------------|-----------------------------------------------|--|
|        |                                                              | kind(s) of property sold (for example, real espuse; 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      |                                                              |                                                                                        |                                     |                                        |                                   |                                               |  |
|        | (e) Gross sales price                                        | (f) Depreciation allowed (or allowable)                                                |                                     | other basis<br>nse of sale             |                                   | in or (loss)<br>(f) minus (g))                |  |
| а      |                                                              |                                                                                        |                                     |                                        |                                   |                                               |  |
| b      |                                                              |                                                                                        |                                     |                                        |                                   |                                               |  |
| С      |                                                              |                                                                                        |                                     |                                        |                                   |                                               |  |
| d      |                                                              |                                                                                        |                                     |                                        |                                   |                                               |  |
| е      |                                                              |                                                                                        |                                     |                                        |                                   |                                               |  |
|        | Complete only for assets she                                 | nowing gain in column (h) and owned b                                                  | by the foundation                   | on 12/31/69.                           |                                   | l. (h) gain minus                             |  |
|        | (i) FMV as of 12/31/69                                       | (j) Adjusted basis<br>as of 12/31/69                                                   |                                     | s of col. (i)<br>. (j), if any         |                                   | ot less than -0-) <b>or</b><br>from col. (h)) |  |
| а      |                                                              |                                                                                        |                                     |                                        |                                   |                                               |  |
| b      |                                                              |                                                                                        |                                     |                                        |                                   |                                               |  |
| С      |                                                              |                                                                                        |                                     |                                        |                                   |                                               |  |
| d      |                                                              |                                                                                        |                                     |                                        |                                   |                                               |  |
| е      |                                                              |                                                                                        |                                     |                                        |                                   |                                               |  |
| 2      | Capital gain net income of                                   |                                                                                        | also enter in Pa<br>enter -0- in Pa |                                        | 2                                 |                                               |  |
| 3      | Net short-term capital ga                                    | ain or (loss) as defined in sections                                                   | 1222(5) and (6)                     | :                                      |                                   |                                               |  |
|        |                                                              | rt I, line 8, column (c). See instruc                                                  |                                     |                                        |                                   |                                               |  |
|        |                                                              |                                                                                        |                                     |                                        | 3                                 |                                               |  |
| Part ' | V Qualification Und                                          | der Section 4940(e) for Redu                                                           | ced Tax on N                        | let Investment                         | Income                            |                                               |  |
|        | SECTI                                                        | TON 4940(e) REPEALED ON DEC                                                            | <b>CEMBER 20, 20</b>                | 019 – DO NOT C                         | OMPLETE.                          |                                               |  |
| 1      | Reserved                                                     |                                                                                        |                                     |                                        |                                   |                                               |  |
|        | (a)<br>Reserved                                              | <b>(b)</b><br>Reserved                                                                 |                                     | (c)<br>Reserved                        |                                   | (d)<br>Reserved                               |  |
|        | Reserved                                                     |                                                                                        |                                     |                                        |                                   |                                               |  |
|        | Reserved                                                     |                                                                                        |                                     |                                        |                                   |                                               |  |
|        | Reserved                                                     |                                                                                        |                                     |                                        |                                   |                                               |  |
|        | Reserved                                                     |                                                                                        |                                     |                                        |                                   |                                               |  |
|        | Reserved                                                     |                                                                                        |                                     |                                        |                                   |                                               |  |
|        |                                                              |                                                                                        | •                                   |                                        |                                   |                                               |  |
| 2      | Reserved                                                     |                                                                                        |                                     |                                        | . 2                               |                                               |  |
|        |                                                              |                                                                                        |                                     |                                        |                                   |                                               |  |
| 3      | Reserved                                                     |                                                                                        |                                     |                                        | . 3                               |                                               |  |
|        |                                                              |                                                                                        |                                     |                                        |                                   |                                               |  |
| 4      | Reserved                                                     |                                                                                        |                                     |                                        | . 4                               |                                               |  |
|        |                                                              |                                                                                        |                                     |                                        |                                   |                                               |  |
| 5      | Reserved                                                     |                                                                                        |                                     |                                        | . 5                               |                                               |  |
|        |                                                              |                                                                                        |                                     |                                        |                                   |                                               |  |
| 6      | Reserved                                                     |                                                                                        |                                     |                                        | . 6                               |                                               |  |
|        |                                                              |                                                                                        |                                     |                                        |                                   |                                               |  |
| 7      | Reserved                                                     |                                                                                        |                                     |                                        | . 7                               |                                               |  |
| _      |                                                              |                                                                                        |                                     |                                        |                                   |                                               |  |
| 8      | Reserved                                                     |                                                                                        | <u> </u>                            | <u> </u>                               | . 8                               |                                               |  |

| Part '     | VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948—see instruction                                                                                                                  | ons) |     |     |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|-----|-----|
| 1a         | Exempt operating foundations described in section 4940(d)(2), check here ▶□ and enter "N/A" on line 1. )                                                                                                     |      |     |     |
|            | Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)                                                                                                                |      |     |     |
| b          | Reserved                                                                                                                                                                                                     |      |     |     |
| С          | All other domestic foundations enter 1.39% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)                                                                                  |      |     |     |
| 2          | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)                                                                                                   |      |     |     |
| 3          | Add lines 1 and 2                                                                                                                                                                                            |      |     |     |
| 4          | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)                                                                                                 |      |     |     |
| 5          | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0                                                                                                                       |      |     |     |
| 6          | Credits/Payments:                                                                                                                                                                                            |      |     |     |
| а          | 2020 estimated tax payments and 2019 overpayment credited to 2020 6a                                                                                                                                         |      |     |     |
| b          | Exempt foreign organizations—tax withheld at source                                                                                                                                                          |      |     |     |
| С          | Tax paid with application for extension of time to file (Form 8868) <b>6c</b>                                                                                                                                |      |     |     |
| d          | Backup withholding erroneously withheld                                                                                                                                                                      |      |     |     |
| 7          | Total credits and payments. Add lines 6a through 6d                                                                                                                                                          |      |     |     |
| 8          | Enter any <b>penalty</b> for underpayment of estimated tax. Check here  if Form 2220 is attached                                                                                                             |      |     |     |
| 9          | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed                                                                                                                                |      |     |     |
| 10         | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid                                                                                                                    |      |     |     |
| 11<br>Part | Enter the amount of line 10 to be: Credited to 2021 estimated tax ► Refunded ► 11  VII-A Statements Regarding Activities                                                                                     |      |     |     |
| Tart<br>1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it                                                                                             |      | Yes | No  |
| ıu         | participate or intervene in any political campaign?                                                                                                                                                          | 1a   | 103 | 140 |
| b          | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the                                                                                                 | i a  |     |     |
|            | instructions for the definition                                                                                                                                                                              | 1b   |     |     |
|            | If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. |      |     |     |
| С          | Did the foundation file Form 1120-POL for this year?                                                                                                                                                         | 1c   |     |     |
| d          | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:                                                                                                           |      |     |     |
|            | (1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$                                                                                                                                                 |      |     |     |
| е          | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed                                                                                                |      |     |     |
| •          | on foundation managers. • \$                                                                                                                                                                                 |      |     |     |
| 2          | Has the foundation engaged in any activities that have not previously been reported to the IRS?                                                                                                              | 2    |     |     |
| 3          | Has the foundation made any changes, not previously reported 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 .                                                                                                | 3    |     |     |
| 4a         | Did the foundation have unrelated business gross income of \$1,000 or more during the year?                                                                                                                  | 4a   |     |     |
| b          | If "Yes," has it filed a tax return on Form 990-T for this year?                                                                                                                                             | 4b   |     |     |
| 5          | Was there a liquidation, termination, dissolution, or substantial contraction during the year?                                                                                                               | 5    |     |     |
|            | If "Yes," attach the statement required by General Instruction T.                                                                                                                                            |      |     |     |
| 6          | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:                                                                                                            |      |     |     |
|            | By language in the governing instrument, or     Division that affectively amende the governing instrument as that no mandatory directions that                                                               |      |     |     |
|            | • 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?                                 | 6    |     |     |
| 7          | 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 XV                                                                            | 7    |     |     |
| ,<br>8а    | Enter the states to which the foundation reports or with which it is registered. See instructions.                                                                                                           | 1    |     |     |
| ou         | Enter the states to which the foundation reports of with which it is registered. Occ instructions.                                                                                                           |      |     |     |
| b          | 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                                                                                                               | 8b   |     |     |
| 9          | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or                                                                                              |      |     |     |
|            | 4942(j)(5) for calendar year 2020 or the tax year beginning in 2020? See the instructions for Part XIV. If "Yes,"                                                                                            |      |     |     |
|            | complete Part XIV                                                                                                                                                                                            | 9    |     |     |
| 10         | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their                                                                                               |      |     |     |
|            | names and addresses                                                                                                                                                                                          | 10   |     | 1   |

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 

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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 2020?

3b

4a

4b

Form 990-PF (2020) Page 6 Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued) Yes No **5a** During the year, did the foundation pay or incur any amount to: (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? . 

Yes 
No (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? . . . . . . . . . . . . . . No (3) Provide a grant to an individual for travel, study, or other similar purposes? . . . . . . No (4) Provide a grant to an organization other than a charitable, etc., organization described in No (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? . . . . . . . . . . . . . b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions 5b Organizations relying on a current notice regarding disaster assistance, check here . . . . If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? . . . . . . . No If "Yes," attach the statement required by Regulations section 53.4945-5(d). Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b If "Yes" to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  $\square$  Yes  $\square$  No If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? . 7b Is the foundation 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? . . . . . . . . . . . . . . Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, and foundation managers and their compensation. See instructions. (c) Compensation (If not paid, enter -0-) (b) Title, and average (d) Contributions to (e) Expense account, (a) Name and address employee benefit plans hours per week other allowances devoted to position and deferred compensation 2 Compensation of five highest-paid employees (other than those included on line 1-see instructions). If none, enter "NONE." (d) Contributions to (b) Title, and average employee benefit plans and deferred (e) Expense account, other allowances (a) Name and address of each employee paid more than \$50,000 hours per week (c) Compensation devoted to position compensation

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

| Part VIII     | Information About Officers, Directors, Trustees, Foundation Managers, Hig and Contractors (continued)                                                                                                             | ghly Paid Employees,     |
|---------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| 3 Five        | highest-paid independent contractors for professional services. See instructions. If none                                                                                                                         | e, enter "NONE."         |
|               | (a) Name and address of each person paid more than \$50,000 (b) Type of se                                                                                                                                        | ervice (c) Compensation  |
|               |                                                                                                                                                                                                                   |                          |
|               |                                                                                                                                                                                                                   |                          |
|               |                                                                                                                                                                                                                   |                          |
| Total numb    | er of others receiving over \$50,000 for professional services                                                                                                                                                    |                          |
| Part IX-A     |                                                                                                                                                                                                                   |                          |
| List the fou  | undation's four largest direct charitable activities during the tax year. Include relevant statistical information such a ns and other beneficiaries served, conferences convened, research papers produced, etc. | s the number of Expenses |
| 1             |                                                                                                                                                                                                                   |                          |
| 2             |                                                                                                                                                                                                                   |                          |
| 3             |                                                                                                                                                                                                                   |                          |
| 4             |                                                                                                                                                                                                                   |                          |
| Part IX-B     | Summary of Program-Related Investments (see instructions)                                                                                                                                                         |                          |
|               | e two largest program-related investments made by the foundation during the tax year on lines 1 and 2.                                                                                                            | Amount                   |
| 1             |                                                                                                                                                                                                                   |                          |
| 2             |                                                                                                                                                                                                                   |                          |
| All other pro | ogram-related investments. See instructions.                                                                                                                                                                      |                          |
| Total Add I   | lines 1 through 3                                                                                                                                                                                                 |                          |

| Part      |                                                                                                                                                                              | 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         | <b>Total</b> (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 11/2% of line 3 (for greater amount, see                                                                                   |        |                        |
| _         | instructions)                                                                                                                                                                | 4      |                        |
| 5         | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4                                                                         | 5      |                        |
| 6<br>Part | Minimum investment return. Enter 5% of line 5                                                                                                                                | 6      | ationo                 |
| rart      | and certain foreign organizations, check here ► and do not complete this part.)                                                                                              | Juliu  | ations                 |
| 1         | Minimum investment return from Part X, line 6                                                                                                                                | 1      |                        |
| 2а        | Tax on investment income for 2020 from Part VI, line 5                                                                                                                       | •      |                        |
| b         | Income tax for 2020. (This does not include the tax from Part VI.) 2b                                                                                                        |        |                        |
| c         | 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 XIII,                                                                                  |        |                        |
|           | line 1                                                                                                                                                                       | 7      |                        |
| Part      | XII 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 IX-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 V, line 8; and Part XIII, line 4                                                                   | 4      |                        |
| 5         | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.                                                                         |        |                        |
| 6         | Enter 1% of Part I, line 27b. See instructions                                                                                                                               | 5<br>6 |                        |
| 6         | Adjusted qualifying distributions. Subtract line 5 from line 4                                                                                                               |        | Alaan Alaa Karraal at' |
|           | <b>Note:</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years |        | ther the foundation    |

| Part                                           | XIII Undistributed Income (see instruction                                                                                                                                                                                                                | ons)          |                            |                    |                    |
|------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------------------|--------------------|--------------------|
|                                                |                                                                                                                                                                                                                                                           | (a)<br>Corpus | (b)<br>Years prior to 2019 | <b>(c)</b><br>2019 | <b>(d)</b><br>2020 |
| 1                                              | Distributable amount for 2020 from Part XI, line 7                                                                                                                                                                                                        |               |                            |                    |                    |
| 2<br>a<br>b<br>3<br>a<br>b<br>c<br>d<br>e<br>f | Undistributed income, if any, as of the end of 2020:  Enter amount for 2019 only  Total for prior years: 20, 20, 20  Excess distributions carryover, if any, to 2020:  From 2015  From 2016  From 2017  From 2018  From 2019  Total of lines 3a through e |               |                            |                    |                    |
| 4                                              | Qualifying distributions for 2020 from Part XII, line 4: ▶ \$                                                                                                                                                                                             |               |                            |                    |                    |
| a<br>b                                         | Applied to 2019, but not more than line 2a . Applied to undistributed income of prior years (Election required—see instructions)                                                                                                                          |               |                            |                    |                    |
| С                                              | Treated as distributions out of corpus (Election required—see instructions)                                                                                                                                                                               |               |                            |                    |                    |
| d<br>e                                         | Applied to 2020 distributable amount Remaining amount distributed out of corpus                                                                                                                                                                           |               |                            |                    |                    |
| 5                                              | Excess distributions carryover applied to 2020 (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<br>b                                         | Corpus. Add lines 3f, 4c, and 4e. Subtract line 5<br>Prior years' undistributed income. Subtract<br>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 2019. Subtract line 4a from line 2a. Taxable amount—see instructions                                                                                                                                                             |               |                            |                    |                    |
| f                                              | Undistributed income for 2020. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2021                                                                                                                                               |               |                            |                    |                    |
| 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 2015 not applied on line 5 or line 7 (see instructions) .                                                                                                                                                             |               |                            |                    |                    |
| 9                                              | Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a                                                                                                                                                                               |               |                            |                    |                    |
| 10<br>a<br>b<br>c<br>d                         | Analysis of line 9:  Excess from 2016  Excess from 2017  Excess from 2018  Excess from 2019                                                                                                                                                               |               |                            |                    |                    |

Page 9

Form 990-PF (2020) Page 10 Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) 1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2020, enter the date of the ruling . . . . . . . Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5) Enter the lesser of the adjusted net Tax year Prior 3 years (e) Total income from Part I or the minimum (a) 2020 **(b)** 2019 (c) 2018 (d) 2017 investment return from Part X for each year listed . . . . . . . **b** 85% of line 2a . . . . . . Qualifying distributions from Part XII, line 4, for each year listed . . . . **d** Amounts included in line 2c not used directly for active conduct of exempt activities . . . e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: "Assets" alternative test-enter: (1) Value of all assets . . . . . (2) Value of assets qualifying under section 4942(j)(3)(B)(i) . . . . "Endowment" alternative test-enter 2/3 of minimum investment return shown in Part X, line 6, for each year listed **c** "Support" alternative test—enter: (1) Total support other than gross investment income (interest. dividends, rents, payments on (section loans securities 512(a)(5)), or royalties) . (2) Support from general public 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 . Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at Part XV any time during the year—see instructions.) **Information Regarding Foundation Managers:** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here ▶ ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions. a The name, address, and telephone number or email address of the person to whom applications should be addressed: The form in which applications should be submitted and information and materials they should include: c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

| Part | Part XV Supplementary Information (continued) |                                                                                                                    |                      |                     |        |  |
|------|-----------------------------------------------|--------------------------------------------------------------------------------------------------------------------|----------------------|---------------------|--------|--|
| 3    | Grants and Contributions Paid During          | he Year or Approv                                                                                                  | ed for Fu            | ture Payment        |        |  |
|      | Recipient                                     | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation status of | Purpose of grant or | Amount |  |
|      | Name and address (home or business)           | or substantial contributor                                                                                         | recipient            | contribution        |        |  |
| а    |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
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|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    | •                    |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    | •                    |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      | Total                                         |                                                                                                                    |                      | <b>&gt;</b> 3a      |        |  |
| b    | Approved for future payment                   |                                                                                                                    | <br>                 | ► 3a                | 2      |  |
|      | rpproved for fatare payment                   |                                                                                                                    | •                    |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    | †                    |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      |                                               |                                                                                                                    |                      |                     |        |  |
|      | Total                                         |                                                                                                                    |                      | <b>&gt;</b> 3k      | 0      |  |

| intor gr                    | oss amounts unless otherwise indicated.                                                         | Unrelated bu         | ısiness income       | Excluded by section   | on 512, 513, or 514                      | (6)                                                   |
|-----------------------------|-------------------------------------------------------------------------------------------------|----------------------|----------------------|-----------------------|------------------------------------------|-------------------------------------------------------|
|                             |                                                                                                 | (a)<br>Business code | <b>(b)</b><br>Amount | (c)<br>Exclusion code | <b>(d)</b><br>Amount                     | Related or exempt function income (See instructions.) |
|                             | ogram service revenue:                                                                          |                      |                      |                       |                                          | (Coo mondono.)                                        |
| a                           |                                                                                                 |                      |                      |                       |                                          |                                                       |
| b                           |                                                                                                 |                      |                      |                       |                                          |                                                       |
| c<br>d                      |                                                                                                 |                      |                      |                       |                                          |                                                       |
| e                           |                                                                                                 |                      |                      |                       |                                          |                                                       |
| f                           | -                                                                                               |                      |                      |                       |                                          |                                                       |
| g                           | Fees and contracts from government agencies                                                     |                      |                      |                       |                                          |                                                       |
| _                           | embership dues and assessments                                                                  |                      |                      |                       |                                          |                                                       |
| 3 Int                       | erest on savings and temporary cash investments                                                 |                      |                      |                       |                                          |                                                       |
| 4 Div                       | ridends and interest from securities                                                            |                      |                      |                       |                                          |                                                       |
| <b>5</b> Ne                 | t rental income or (loss) from real estate:                                                     |                      |                      |                       |                                          |                                                       |
|                             | Debt-financed property                                                                          |                      |                      |                       |                                          |                                                       |
|                             | Not debt-financed property                                                                      |                      |                      |                       |                                          |                                                       |
|                             | t rental income or (loss) from personal property                                                |                      |                      |                       |                                          |                                                       |
|                             | ner investment income                                                                           |                      |                      |                       |                                          |                                                       |
|                             | in or (loss) from sales of assets other than inventory                                          |                      |                      |                       |                                          |                                                       |
|                             | t income or (loss) from special events                                                          |                      |                      |                       |                                          |                                                       |
|                             | ner revenue: <b>a</b>                                                                           |                      |                      |                       |                                          |                                                       |
| b b                         |                                                                                                 |                      |                      |                       |                                          |                                                       |
| c                           |                                                                                                 |                      |                      |                       |                                          |                                                       |
| d                           |                                                                                                 |                      |                      |                       |                                          |                                                       |
| е                           |                                                                                                 |                      |                      |                       |                                          |                                                       |
| <b>12</b> Su                | btotal. Add columns (b), (d), and (e)                                                           |                      |                      |                       |                                          |                                                       |
|                             | tal. Add line 12, columns (b), (d), and (e)                                                     |                      |                      |                       | 13                                       |                                                       |
|                             |                                                                                                 |                      |                      |                       |                                          |                                                       |
| See wo                      | rksheet in line 13 instructions to verify calculation                                           | s.)                  |                      |                       |                                          |                                                       |
| See wo<br>Part X            | rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A | s.)<br>.ccomplishm   |                      |                       |                                          |                                                       |
| ee wo<br>Part X             | rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A | s.)<br>.ccomplishm   |                      |                       | -A contributed ir oses). (See instruc    | mportantly to the                                     |
| See wo<br>Part X<br>Line No | rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A | s.)<br>.ccomplishm   |                      |                       | -A contributed ir<br>oses). (See instruc | mportantly to the titions.)                           |
| ee wo<br>Part X<br>Line No  | rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A | s.)<br>.ccomplishm   |                      |                       | -A contributed ir<br>oses). (See instruc | mportantly to the tions.)                             |
| ee wo<br>Part X<br>Line No  | rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A | s.)<br>.ccomplishm   |                      |                       | -A contributed ir oses). (See instruc    | mportantly to the tions.)                             |
| See wo<br>Part X<br>Line No | rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A | s.)<br>.ccomplishm   |                      |                       | -A contributed ir<br>oses). (See instruc | mportantly to the                                     |
| ee wo<br>Part X<br>Line No  | rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A | s.)<br>.ccomplishm   |                      |                       | -A contributed ir<br>oses). (See instruc | mportantly to the                                     |
| ee wo<br>Part X<br>Line No  | rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A | s.)<br>.ccomplishm   |                      |                       | -A contributed ir<br>oses). (See instruc | mportantly to the                                     |
| See wo<br>Part X<br>Line No | rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A | s.)<br>.ccomplishm   |                      |                       | -A contributed ir<br>oses). (See instruc | mportantly to the                                     |
| See wo<br>Part X<br>Line No | rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A | s.)<br>.ccomplishm   |                      |                       | -A contributed ir oses). (See instruc    | mportantly to the                                     |
| See wo<br>Part X<br>Line No | rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A | s.)<br>.ccomplishm   |                      |                       | -A contributed ir oses). (See instruc    | mportantly to the                                     |
| See wo<br>Part X<br>Line No | rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A | s.)<br>.ccomplishm   |                      |                       | -A contributed ir oses). (See instruc    | mportantly to the                                     |
| See wo<br>Part X<br>Line No | rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A | s.)<br>.ccomplishm   |                      |                       | -A contributed in oses). (See instruc    | mportantly to the                                     |
| See wo<br>Part X<br>Line No | rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A | s.)<br>.ccomplishm   |                      |                       | -A contributed ir oses). (See instruc    | mportantly to the                                     |
| See wo<br>Part X<br>Line No | rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A | s.)<br>.ccomplishm   |                      |                       | -A contributed in poses). (See instruc   | mportantly to the                                     |
| See wo<br>Part X<br>Line No | rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A | s.)<br>.ccomplishm   |                      |                       | -A contributed ir oses). (See instruc    | mportantly to the                                     |
| See wo<br>Part X<br>Line No | rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A | s.)<br>.ccomplishm   |                      |                       | -A contributed in poses). (See instruc   | mportantly to the                                     |
| See wo<br>Part X<br>Line No | rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A | s.)<br>.ccomplishm   |                      |                       | -A contributed in oses). (See instruc    | mportantly to the                                     |
| See wo<br>Part X<br>Line No | rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A | s.)<br>.ccomplishm   |                      |                       | -A contributed in poses). (See instruc   | mportantly to the                                     |

### Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Part XVII **Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political Transfers from the reporting foundation to a noncharitable exempt organization of: 1a(1) 1a(2) Other transactions: (1) Sales of assets to a noncharitable exempt organization . . . 1b(1) (2) Purchases of assets from a noncharitable exempt organization . 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements . . . . . . . 1b(4) 1b(5) 1b(6) (6) Performance of services or membership or fundraising solicitations . . . Sharing of facilities, equipment, mailing lists, other assets, or paid employees . . . . . . . . . . . . . . . . If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (a) Line no. Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? . . . . . . . . . . . . . . . . . Yes No **b** If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship 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. Sign May the IRS discuss this return with the preparer shown below? Here See instructions. Yes No Title Signature of officer or trustee Date Print/Type preparer's name Preparer's signature Date **Paid** Check if self-employed **Preparer** Firm's name Firm's EIN ▶ Use Only

Firm's address ▶

Phone no.

## Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service Name of the organization

### Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

**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 ☐ 501(c)(3) exempt private foundation 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 or 990-EZ), 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,

990-EZ, or 990-PF), 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, 990-EZ, or 990-PF).

Name of organization

Employer identification number

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

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