

Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

2020

Open to Public Inspection

Form **990-PF**

Department of the Treasury
Internal Revenue Service

For calendar year 2020 or tax year beginning , and ending

Name of foundation ROUND ROOM GIVES, INC.		A Employer identification number 84-4783133
Number and street (or P.O. box number if mail is not delivered to street address) 10300 KINCAID DRIVE SUITE 203	Room/suite	B Telephone number 317-417-2674
City or town, state or province, country, and ZIP or foreign postal code FISHERS, IN 46037		C If exemption application is pending, check here ... <input type="checkbox"/>
G Check all that apply: <input checked="" type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ... <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 774,223.	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ... <input type="checkbox"/>

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received	1,200,236.		N/A	
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)		0.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss)					
11 Other income					
12 Total. Add lines 1 through 11		1,200,236.	0.		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	0.	0.		0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees				
	b Accounting fees				
	c Other professional fees STMT 1	374.	0.		0.
	17 Interest				
	18 Taxes				
	19 Depreciation and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications	1,734.	0.		0.
	23 Other expenses STMT 2	5,190.	0.		0.
	24 Total operating and administrative expenses. Add lines 13 through 23	7,298.	0.		0.
	25 Contributions, gifts, grants paid	728,811.			726,811.
26 Total expenses and disbursements. Add lines 24 and 25	736,109.	0.		726,811.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements ...	464,127.				
b Net investment income (if negative, enter -0-)		0.			
c Adjusted net income (if negative, enter -0-)			N/A		

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions. ROUND ROOM GIVES, INC.	Taxpayer identification number (TIN) 84-4783133
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 10300 KINCAID DRIVE SUITE 203	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. FISHERS, IN 46037	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 4

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

TIM SPRINGER

- The books are in the care of ▶ **10300 KINCAID DRIVE SUITE 203 - FISHERS, IN 46037**
Telephone No. ▶ **260-417-9830** Fax No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **NOVEMBER 15, 2021**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ calendar year **2020** or
▶ tax year beginning _____, and ending _____.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only.		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing		733,837.	733,837.
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable		40,386.	40,386.
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
	11 Investments - land, buildings, and equipment: basis			
Less: accumulated depreciation				
12 Investments - mortgage loans				
13 Investments - other				
14 Land, buildings, and equipment: basis ▶				
Less: accumulated depreciation				
15 Other assets (describe ▶				
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	0.	774,223.	774,223.	
Liabilities	17 Accounts payable and accrued expenses		96.	
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶ RELATED PARTY PAYA)	0.	310,000.	
23 Total liabilities (add lines 17 through 22)	0.	310,096.		
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 24, 25, 29, and 30.			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds	0.	0.	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
	28 Retained earnings, accumulated income, endowment, or other funds	0.	464,127.	
	29 Total net assets or fund balances	0.	464,127.	
30 Total liabilities and net assets/fund balances	0.	774,223.		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	0.
2 Enter amount from Part I, line 27a	2	464,127.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	464,127.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	464,127.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; 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	NONE		
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			
b			
c			
d			
e			

2	Capital gain net income or (net capital loss) } { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income
SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 - DO NOT COMPLETE.

1	(a) Reserved	(b) Reserved	(c) Reserved	(d) Reserved
	Reserved			

2	Reserved	2	
3	Reserved	3	
4	Reserved	4	
5	Reserved	5	
6	Reserved	6	
7	Reserved	7	
8	Reserved	8	

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions)

Table with 11 rows for excise tax calculations. Includes fields for exempt foundations, reserved, domestic foundations, tax under section 511, add lines 1 and 2, subtitle A tax, tax based on investment income, credits/payments (6a-6d), total credits, penalty, tax due, overpayment, and amount credited to 2021 estimated tax.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes questions about influencing legislation, political purposes, Form 1120-POL filing, tax on political expenditures, reimbursement, IRS reporting, unrelated business income, liquidation, section 508(e) requirements, assets, reporting states, and substantial contributors.

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-16 containing questions about controlled entities, distributions, public inspection, website address, books in care, and foreign country interests.

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

Table with 3 columns: Question, Yes, No. Rows 1a-4b containing questions about disqualifying acts, taxes on failure to distribute income, and business holdings.

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))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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	X
Organizations relying on a current notice regarding disaster assistance, check here	<input type="checkbox"/>		
c 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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6b	X
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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A	7b	
8 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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, and foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SCOTT MOOREHEAD 10300 KINCAID DRIVE SUITE 203 FISHERS, IN 46037	BOARD CHAIRMAN 1.00	0.	0.	0.
JULIE MOOREHEAD 10300 KINCAID DRIVE SUITE 203 FISHERS, IN 46037	BOARD MEMBER 1.00	0.	0.	0.
CHAD JENSEN 10300 KINCAID DRIVE SUITE 203 FISHERS, IN 46037	BOARD MEMBER 1.00	0.	0.	0.
KATIE WILEY 10300 KINCAID DRIVE SUITE 203 FISHERS, IN 46037	BOARD MEMBER 1.00	0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services 0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
4	

Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
3 All other program-related investments. See instructions.	

Total. Add lines 1 through 3 0.

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			
a	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	218,969.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	218,969.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	218,969.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	3,285.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	215,684.
6	Minimum investment return. Enter 5% of line 5	6	10,784.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	10,784.
2a	Tax on investment income for 2020 from Part VI, line 5	2a	
b	Income tax for 2020. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	10,784.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	10,784.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	10,784.

Part XII Qualifying Distributions (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	726,811.
b	Program-related investments - total from Part IX-B	1b	0.
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	726,811.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	726,811.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2019	(c) 2019	(d) 2020
1 Distributable amount for 2020 from Part XI, line 7				10,784.
2 Undistributed income, if any, as of the end of 2020:				
a Enter amount for 2019 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2020:				
a From 2015				
b From 2016				
c From 2017				
d From 2018				
e From 2019				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2020 from Part XII, line 4: ▶ \$ 726,811.				
a Applied to 2019, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2020 distributable amount				10,784.
e Remaining amount distributed out of corpus	716,027.			
5 Excess distributions carryover applied to 2020 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	716,027.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c 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		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2020. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2021				0.
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)	0.			
8 Excess distributions carryover from 2015 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a	716,027.			
10 Analysis of line 9:				
a Excess from 2016				
b Excess from 2017				
c Excess from 2018				
d Excess from 2019				
e Excess from 2020	716,027.			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A

1 a 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

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

Table with 5 columns: (a) 2020, (b) 2019, (c) 2018, (d) 2017, (e) Total. Rows include 2a-e (Qualifying distributions) and 3a-d (Alternative tests).

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)

1 Information Regarding Foundation Managers: a 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 STATEMENT 6

b 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.

NONE

2 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.

a The name, address, and telephone number or email address of the person to whom applications should be addressed: SEE STATEMENT 7

SEE STATEMENT 5

b 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 XV Supplementary Information *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution **	Amount
a Paid during the year				
100 BLACK MEN OF SOUTH METRO ATLANTA 1513 EAST CLEVELAND AVE., STE. 101-A ATLANTA, GA 30344	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
A FAITH THAT DOES JUSTICE 300 NEWBURY STREET BOSTON, MA 02115	N/A	PC	EQUAL JUSTICE PROGRAMMING	4,200.
A NEW LEAF 868 E. UNIVERSITY DR. MESA, AZ 85203	N/A	PC	GENERAL PROGRAM NEEDS	4,022.
AC RESCUE MISSION 2009 BACHARACH BLVD. ATLANTIC CITY, NJ 08401	N/A	PC	COVID RELIEF	2,000.
ACLU OF ALABAMA FOUNDATION PO BOX 6179 MONTGOMERY, AL 36106	N/A	PC	EQUAL JUSTICE PROGRAMMING	3,000.
Total SEE CONTINUATION SHEET(S) ▶ 3a				728,811.
b Approved for future payment				
NONE				
Total ▶ 3b				0.

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
ACLU OF OREGON FOUNDATION PO BOX 40585 PORTLAND, OR 97240	N/A	PC	EQUAL JUSTICE PROGRAMMING	3,000.
ACLU OF PENNSYLVANIA FOUNDATION PO BOX 60173 PHILADELPHIA, PA 19102	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
ADVOCATES FOR BASIC LEGAL EQUALITY, INC 130 WEST 2ND STREET, SUITE 700 DAYTON, OH 45402	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
AKRON CANTON FOODBANK 350 OPPORTUNITY PARKWAY AKRON, OH 44307	N/A	PC	COVID RELIEF	2,000.
ALDEN-MARILLA FOOD PANTRY 13021 MAIN ST ALDEN, NY 14004	N/A	PC	COVID RELIEF	2,000.
ALPHA PHI ALPHA FRATERNITY, INC. PO BOX 957714 DULUTH, GA 30095	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
ALTON AREA ANIMAL AID ASSOCIATION (5 A'S) 4530 N. ALBY ROAD GODFREY, IL 62035	N/A	PC	CREATE A FLYER TO BE GIVEN OUT TO ADOPTIVE PARENTS OF A NO-KILL ANIMAL RESCUE	1,500.
ALWAYS GIVING BACK FOUNDATION 7545 S. WESTERN CHICAGO, IL 60620	N/A	PC	GENERAL PROGRAM NEEDS	6,025.
ANGELS' ARMS 12128A TESSON FERRY RD. ST. LOUIS, MO 63128	N/A	PC	FILL A WAREHOUSE WITH FOOD, CLOTHING, TOILETRIES, PAPER PRODUCTS, DIAPERS, BEDDING, LAUNDRY	2,000.
ANGELS IN MOTION 903 WALNUT AVENUE NORTHFIELD, NJ 08225	N/A	PC	PURCHASE ITEMS TO BE USED FOR BLESSING BAGS WHICH ARE DISTRIBUTED TO HOMELESS INDIVIDUALS STRUGGLING	2,000.
Total from continuation sheets				713,589.

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
ANGELS VOICE ORPHANAGE P.O. BOX 415 WEYMOUTH, MA 02190	N/A	PC	GENERAL PROGRAM NEEDS	3,105.
APOSTOLIC CHURCH OF WARNER ROBINS 821 RUSSELL PARKWAY WARNER ROBINS, GA 31088	N/A	PC	REPLACE THE TIRES ON A VAN AND TRAILER, AS WELL AS A REFRIGERATOR AND FREEZER AT A COMMUNITY FOOD PANTRY	3,000.
ARCH CITY DEFENDERS 6209 OLEATHA ST. LOUIS, MO 63139	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
ARNOLD FOOD PANTRY 2024 KEY WEST DR. ARNOLD, MO 63010	N/A	PC	COVID RELIEF	2,000.
ASSUMPTION BVM SCHOOL 290 STATE ROAD WEST GROVE, PA 19390	N/A	PC	FOSTER A NEW TECHNOLOGY NEED THROUGH THE PURCHASE OF 12 NEW LAPTOPS FOR TEACHERS WORKING WITH	3,500.
ATHENS AREA HOMELESS SHELTER 435 HAWTHORNE AVENUE, SUITE 600 ATHENS, GA 30606	N/A	PC	COVID RELIEF	2,000.
BATTLE BORNE 1220 S. HALSTEAD ST. ALLENTOWN, PA 18034	N/A	PC	PROMOTE A VETERAN PEER TO PEER SUPPORT GROUP AND WORKSHOP AND SUPPORT PROGRAMS THROUGH ASSISTANCE IN	1,000.
BE A BETTER ME PO BOX 2007 CANTON, OH 18103	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
BEST BUDDIES 8604 ALLISONVILLE ROAD, SUITE 165 INDIANAPOLIS, IN 44701	N/A	PC	HELP TO CREATE MORE INCLUSIVE SCHOOLS, COMMUNITIES, AND WORKPLACES, AS WELL AS EXPANSION OF PROGRAMS	10,000.
BEYOND HUNGER 848 LAKE STREET OAK PARK, IL 46250	N/A	PC	COVID RELIEF	2,000.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
BEYOND PREGNANCY CARE 1541 MILL SLOUGH ROAD KISSIMMEE, FL 60301	N/A	PC	CHILD CARE SUPPLIES OFFERING CURBSIDE PICKUP OF PACKAGES OF DIAPERS, FORMULA, FOOD FOR THOSE IN NEED.	2,000.
BEYOND THE WALLS INC 1837 N EAST BLVD VINELAND, NJ 34744	N/A	PC	PURCHASE FOOD, PERSONAL ITEMS, EQUIPMENT AND SUPPLIES FOR TWO FOOD PANTRIES IN THE COMMUNITY	2,000.
BIG FISH CHARITABLE FOUNDATION 37369 MARTIN ST REHOBOTH BEACH, DE 08360	N/A	PC	PROPERLY OUTFIT BASIC NEEDS SCHOOL CLOSETS IN LOW-INCOME SCHOOLS	1,000.
BLACK GIRLS CODE PO BOX 640926 SAN FRANCISCO, CA 19971	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
BLACK LIVES MATTER SOUTH CAROLINA 1000 POPULAR ST. CACYCE, SC 29033	N/A	PF	SOCIAL INJUSTICE GRANTS	2,000.
BLACK MOTHERS FORUMS P.O. BOX 90917 PHOENIX, AZ 85066	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
BLACK SCRANTON PROJECT INC. 801 TOWNHOUSE BLVD. SCRANTON, PA 18508	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
BORDER NETWORK FOR HUMAN RIGHTS 2115 N. PIEDRAS EL PASO, TX 79930	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
BOYS & GIRLS CLUBS OF STORY COUNTY 210 S 5TH STREET AMES, IA 50010	N/A	PC	COVER THE COSTS OF A FOOD PROGRAM AT AN AFTER SCHOOL PROGRAM FOR CHILDREN	1,000.
BRADFORD FRIENDSHIP TABLE 21 EAST CORYDON STREET BRADFORD, PA 16701	N/A	PC	COVID RELIEF	2,000.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
BRAYBOY SAFETY AGAINST DOMESTIC VIOLENCE CRISIS CENTER PO BOX 286 FORREST CITY, AR 72336	N/A	PC	PROVIDE GUEST AND MOTIVATIONAL SPEAKERS, VENDORS, VICTIMS AND SURVIVORS THAT HAVE EXPERIENCED FIRST HAND	1,500.
BUCKING FOR HOPE 4020 NW RIMROCK ACRES LOOP PRINEVILLE, OR 97754	N/A	PC	HELP WITH THE FINANCIAL BURDER OF PEOPLE OR FAMILIES IN NEED DUE TO A MEDICAL EMERGENCY OR A NATURAL	10,000.
CAMDEN RESCUE MISSION INC 1634 BROADWAY CAMDEN, NJ 08104	N/A	PC	COVID RELIEF	2,000.
CAMERON FOOD PANTRY AND CLOTHES CLOSET 302 N WALNUT STREET CAMERON, MO 64429	N/A	PC	COVID RELIEF	2,000.
CAMP QUALITY NORTHWEST MISSOURI 1325 VILLAGE DR ST. JOSEPH, MO 64506	N/A	PC	PROVIDE CHILDREN WITH CANCER AND THEIR FAMILIES WITH A CAMPING EXPERIENCE INCLUDING A PORK CHOP	3,000.
CAMP SUNSHINE 1850 CLAIRMONT ROAD DECATUR, GA 30033	N/A	PC	PROVIDE CHILDREN WITH CANCER THE OPPORTUNITY TO SHARE CAMP EXPERIENCES WITH FAMILIES	5,000.
CANCER SERVICES OF GRANT COUNTY 305 S. NORTON AVE. MARION, IN 46952	N/A	PC	SUPPORT OF ALL PROGRAMS FOR THOSE FACING CANCER, INCLUDING FREE MAMMOGRAPHY,	3,000.
CANINES FOR CHANGE 10753 COUNTRYSIDE DRIVE GRAND LEDGE, MI 48837	N/A	PC	GENERAL PROGRAM NEEDS	963.
CAROLINE'S AGAPE PROJECT, LLC 303 SYDNEY LANE DENTON, MD 21629	N/A	PC	EXPAND A COMMUNITY PRODUCE GARDEN TO BENEFIT MORE LOW-INCOME FAMILIES DEALING WITH FOOD	1,000.
CARVER NEIGHBORHOOD CENTER 400 SE 8TH ST. EVANSVILLE, IN 47713	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
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Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
CATHOLIC CHARITIES OF BROOME COUNTY 232 MAIN ST. BINGHAMTON, NY 13905	N/A	PC	COVID RELIEF	2,000.
CENTER OF HOPE FRIENDSHIP ROOM PO BOX 53 STEUBENVILLE , OH 43952	N/A	PC	COVID RELIEF	2,000.
CENTRAL ARIZONANS FOR A SUSTAINABLE ECONOMY 1021 S. 7TH AVE., STE. 202 PHOENIX, AZ 85007	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
CHESTERFIELD FOODBANK 12211 IRON BRIDGE ROAD CHESTER, VA 23831	N/A	PC	COVID RELIEF	2,000.
CHICAGO VETERANS 2240 W. OGDEN AVE, SUITE 11 CHICAGO , IL 60612	N/A	PC	VETERAN PROGRAMS	2,500.
CHILDREN'S HARBOR, INC. 1 OUR CHILDREN'S HIGHWAY ALEXANDER CITY, AL 35010	N/A	PC	REPAIR AND ENHANCEMENT OF A SWIMMING POOL AT A HANDICAP ACCESSIBLE PEDIATRIC RETREAT FACILITY FOR CHILDREN	1,000.
CHILDREN'S THERAPY CENTER OF THE QUAD CITIES 4450 48TH AVE. CT. ROCK ISLAND, IL 61201	N/A	PC	OFFSET THE COST ABSORBED BY THE PROGRAM TO CONTINUE THERAPY SUPPORT FOR A CHILD WITH CEREBAL	2,000.
CHIPMAN FOUNDATION PO BOX 4374 SALISBURY, MD 21801	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
CHRISTEL HOUSE INTERNATIONAL 10 WEST MARKET ST., SUITE 1990 INDIANAPOLIS, IN 46204	N/A	PC	PURCHASE CRITICAL TEACHNOLOGY AND PROFESSIONAL DEVELOPMENT NEEDED FOR AN ALTERNATIVE TEACHER	2,500.
CITYWIDE YOUTH COALITION, INC 928 CHAPEL ST SUITE 201/202 NEW HAVEN , CT 06510	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
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Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
COMBAT VETERANS MOTORCYCLE ORGANIZATION 820 THOMAS STREET BICKNELL, IN 47512	N/A	PC	VETERAN PROGRAMS	2,500.
COMMUNITY BONDS, INC. 19 GRAND AVE. NEW HAVEN, CT 06513	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
COMMUNITY HARVEST FOOD BANK OF NORTHEAST INDIANA, INC. 999 EAST TILLMAN ROAD FORT WAYNE, IN 46816	N/A	PC	SUPPORT OF A FARM WAGON MOBILE PANTRY PROGRAM THAT PROVIDES HEALTHY FOOD AT NO COST TO LOW-INCOME	2,000.
COMMUNITY LINC 4012-4014 TROOST AVE. KANSAS CITY, MO 64111	N/A	PC	PROGRAMMING AND SUPPLIES FOR A HOMELESS SHELTER	10,000.
COMMUNITY SERVICES OF MOSES LAKE P.O BOX 683 MOSES LAKE, WA 98837	N/A	PC	COVID RELIEF	2,000.
CONNECTICUT FOOD BANK 2 RESEARCH PARKWAY WALLINGFORD, CT 06492	N/A	PC	GENERAL PROGRAM NEEDS	4,483.
COOPERSVILLE CARES 180 68TH AVE. N COOPERSVILLE, MI 49404	N/A	PC	COVID RELIEF	2,000.
CROHN'S & COLITIS FOUNDATION - INDIANA CHAPTER 5325 E. 82ND ST., #252 INDIANAPOLIS, IN 46250	N/A	PC	EDUCATION, ADVOCACY AND SUPPORT PROGRAMS FOR PATIENTS LIVING WITH CROHN'S AND/OR COLITIS	5,000.
CROSSROADS 89 SOUTH STREET BOSTON, MA 02332	N/A	PC	ALLOW HIGH SCHOOL JUNIORS TO TOUR NINE NEW ENGLAND SCHOOLS AND STAY OVERNIGHT ON CAMPUSES TO EXPERIENCE	2,000.
CYNTHIANA COMMUNITY ACTION COUNCIL 216 OLD LAIR ROAD CYNTHIANA, KY 41030	N/A	PC	COVID RELIEF	2,000.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
DASH DC P.O. BOX 91730 WASHINGTON, DC 20090	N/A	PC	GENERAL PROGRAM NEEDS	4,733.
DAYSRING CENTER 1537 CENTRAL AVENUE INDIANAPOLIS, IN 46202	N/A	PC	COVID RELIEF	2,000.
DES MOINES BLACK LIVES MATTER 601 FOREST AVENUE DES MOINES, IA 50314	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
DETROIT ACTION 1600 E. GRAND BLVD. #305 DETROIT, MI 48211	N/A	PC	EQUAL JUSTICE PROGRAMMING	3,000.
DETROIT JUSTICE CENTER 1420 WASHINGTON BLVD., SUITE 301 DETROIT, MI 48226	N/A	PC	EQUAL JUSTICE PROGRAMMING	3,000.
DISABLED AMERICAN VETERANS PO BOX 136 ONEONTA, AL 35121	N/A	PC	VETERAN PROGRAMS	2,500.
DISABLED AMERICAN VETERANS CORPORAL WILLIAM F REARDON CHAPTER 57 PO BOX 57 TAUNTON, MA 02780	N/A	PC	VETERAN PROGRAMS	2,500.
DREAM ALIVE 7828 E. 88TH ST. INDIANAPOLIS, IN 46256	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
DREAM CENTER PICKENS COUNTY 111 HILCREST DRIVE EASLEY, SC 29640	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
EAST BRIDGEWATER EMERGENCY FOOD PANTRY 105 PLEASANT STREET EAST BRIDGEWATER, MA 02333	N/A	PC	COVID RELIEF	2,000.
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3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
ECONOMIC COUNCIL HELPING OTHERS INC. 1921 E MURRAY DR. FARMINGTON, NM 87401	N/A	PC	COVID RELIEF	2,000.
EMBRACE FAMILIES FOUNDATION 4001 PELEE STREET ORLANDO, FL 32817	N/A	PC	UNDERWRITE SPECIAL PROJECTS TO ENHANCE SERVICES TO CHILDREN IN FOSTER CARE	2,000.
ENZO'S MISSION TO SPREAD HOPE FOUNDATION 301 E. CAMDEN WYOMING AVENUE CAMDEN, DE 19934	N/A	PC	PURCHASE MATTRESSES FOR CHILDREN WHO ARE SLEEPING ON THE FLOOR	2,000.
EPHRATA AREA SOCIAL SERVICES 227 NORTH STATE STREET EPHRATA, PA 17522	N/A	PC	COVID RELIEF	2,000.
EQUAL JUSTICE INITIATIVE 122 COMMERCE ST. MONTGOMERY, AL 36104	N/A	PC	EQUAL JUSTICE PROGRAMMING	10,000.
FAMILY SERVICE SOCIETY-HANDS OF HOPE 101 S. WASHINGTON ST. MARION, IN 46952	N/A	PC	COMPLETE A MAKEOVER OF A CHILDREN'S PLAYROOM IN A DOMESTIC VIOLENCE SHELTER	7,500.
FAMILY SERVICES & PREVENTION PROGRAMS 2021 SOUTH RILEY HIGHWAY SHELBYVILLE, IN 46176	N/A	PC	ASSIST A COMMUNITY SERVICE ORGANIZATION IN COORDINATING PROGRAMS THROUGH THE PURCHASE OF NEW	8,000.
FAYETTE COUNTY COUNCIL ON DOMESTIC VIOLENCE D/B/A PROMISE PLACE 350 NORTH JEFF DAVIS STREET FAYETTEVILLE, GA 30214	N/A	PC	ALLOW SERVICES OF A DOMESTIC VIOLENCE EMERGENCY SHELTER TO REMAIN FREE TO CLIENTS SO THEY MAY RECOVER	3,000.
FEMALE OPPORTUNITY IN RE-ENTRY (F.O.R.E) 701 CHESTNUT ST. LEBANON, PA 17042	N/A	PC	CREATE A "CHANGE TOOL KIT" WHICH INCLUDES A SOCIAL NORMING CAMPAIGN, EDUCATIONAL MATERIALS FOR USE IN	3,000.
FLORIDA SKILLSUSA INC 4446 HENDRICKS AVE, PMB 229 JACKSONVILLE, FL 32207	N/A	PC	SUPPORT OF A CAREER EXPO FOR MIDDLE SCHOOL AND HIGH SCHOOL STUDENTS TO LEARN THE IMPORTANCE OF THE	1,500.
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3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
FOLLOW HARD MINISTRY - CEDAR CREEK CHRISTIAN CENTER 1849 FOX TRAIL WINTERSET, IA 50273	N/A	PC	COVID RELIEF	2,000.
FOOD 4 SOULS 11807 ALLISONVILLE ROAD, #179 FISHERS, IN 46038	N/A	PC	CREATE A CHRIST CENTERED REFUGE WHERE INDIVIDUALS CAN WORK TOWARDS PHYSICAL, MENTAL AND SPIRITUAL	5,000.
FOOD BANK OF THE SOUTHERN TIER 388 UPPER OAKWOOD AVE. ELMIRA, NY 14993	N/A	PC	COVID RELIEF	2,000.
FORCES UNITED 701 GREENE ST., SUITE 104 AUGUSTA, GA 30901	N/A	PC	VETERAN PROGRAMS	2,500.
FOSTERADOPT CONNECT NWMO BRANCH-CHILLICOTHE 409 WASHINGTON STREET CHILLICOTHE, MO 64601	N/A	PC	PROVIDE FOSTER CARE FAMILIES WITH ITEMS THEY NEED TO RETURN TO A NEW SCHOOL, IN ADDITION TO ITEMS	2,000.
FRASER 2400 W. 64TH STREET MINNEAPOLIS, MN 55423	N/A	PC	PROVIDE TABLETS AND HOT SPOTS FOR FAMILIES WHO DO NOT HAVE ACCESS TO TECHNOLOGY OR WIFI FOR VIRTUAL TELEHEALTH	2,000.
FRIENDS OF JOSHUA HOUSE FOUNDATION, INC. PO BOX 26333 TAMPA, FL 33623	N/A	PC	GENERAL PROGRAM NEEDS	1,329.
FRIENDS OF THE POOR 240 E. ELM ST. SCRANTON, PA 18505	N/A	PC	GENERAL PROGRAM NEEDS	2,702.
FRIENDSHIP BAPTIST CHURCH 237 OUTING CLUB ROAD, P.O. BOX 1204 AIKEN, SC 29801	N/A	PC	PURCHASE, INSTALL AND UPDATE CURRENT COMPUTER LAB AT AN ENRICHMENT PROGRAM	1,425.
GEORGIA MOUNTAIN FOOD BANK 1642 CALVARY INDUSTRIAL DR GAINESVILLE, GA 30507	N/A	PC	PURCHASE ELECTRIC PALLET JACKS FOR A WAREHOUSE SUPPORTING A FOOD BANK	12,000.
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3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
GIRLS OF GRACE FOUNDATION 3501 SWEETBAY CIRCLE FAYETTEVILLE, NC 28311	N/A	PC	CULTIVATE A CIRCLE OF SISTERHOOD IN WHICH AT-RISK TEEN GIRLS CAN BE MENTORED BY PROVIDING SAFE-HAVEN	2,000.
GIVE AN HOUR PO BOX 5918 BETHESDA, MD 20824	N/A	PC	VETERAN PROGRAMS	2,500.
GOOD SAMARITAN REHABILITATION 901 BEST AVE. COEUR D ALENE, ID 83815	N/A	PC	SPONSOR INDIVIDUALS IN NEED OF A RECOVERY PROGRAM TO PARTICIPATE IN TREATMENT SERVICES	3,000.
GRACE FOOD PANTRY 302 W PLYMOUTH STREET BREMEN, IN 46506	N/A	PC	COVID RELIEF	2,000.
GRACE POINT LEARNING CENTER & ACADEMY 110 DURLACH ROAD EPHRATA, PA 17522	N/A	PC	PURCHASE 5 CLASSROOM COMPUTERS, FURNITURE AND PLAYGROUND EQUIPMENT FOR A CHILD CARE AND EDUCATIONAL	5,000.
GRANT COUNTY RESCUE MISSION PO BOX 63 MARION, IN 46953	N/A	PC	COVID RELIEF	2,000.
GREATER MILWAUKEE FOUNDATION 101 W. PLEASANT ST., SUITE 210 MILWAUKEE, WI 53212	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
GREATER PITTSBURGH COMMUNITY FOOD BANK 1 N. LINDEN ST. DUQUESNE, PA 15110	N/A	PC	COVID RELIEF	2,000.
GREENLIGHT OPERATION 2645 LISBURN ROAD CAMP HILL, PA 17011	N/A	PC	COVER THE COSTS OF SETTING UP AN OUTDOOR SPACE FOR WOMEN IN A HUMAN TRAFFICKING SHELTER	5,000.
GREENSBURG COMMUNITY BREAD OF LIFE, INC. 700 E. RANDALL ST GREENSBURG, IN 47240	N/A	PC	PURCHASE, UPDATE AND INSTALL ITEMS THAT WILL ALLOW A SOUP KITCHEN TO SPEED UP THE CLEAN-UP PROCESS	1,500.
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3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
GROWING FUTURES EARLY EDUCATION CENTER 8155 SANTA FE DR. OVERLAND PARK, KS 66204	N/A	PC	GENERAL PROGRAM NEEDS	1,707.
GULF COUNTY SCHOOL DISTRICT 150 MIDDLE SCHOOL RD. PORT ST JOE, FL 32456	N/A	PC	PROVIDING MEALS TO THE CHILDREN WITHIN THE GULF COUNTY SCHOOL DISTRICT COMMUNITY WHILE SCHOOL IS OUT	2,000.
HABITAT FOR HUMANITY WEST BAY & NRI PO BOX 6743 WARWICK, RI 02887	N/A	PC	COVER THE FLOORING AND PAVING OF A DRIVEWAY COST FOR A LOW-INCOME FAMILY RECEIVING A NEW HOME	2,000.
HAMILTON SOUTHEASTERN YOUNG LIFE 136 SOUTH 9TH STREET NOBLESVILLE, IN 46037	N/A	PC	OFFSET THE COST OF THE BUSES USED TO TRANSPORT OVER 200 KIDS TO AND FROM SUMMER CAMP	2,500.
HARVEST HOPE PO BOX 451 COLUMBIA, SC 29202	N/A	PC	COVID RELIEF	2,000.
HAZLETON SALVATION ARMY 356 WEST BROAD ST. HAZLETON, PA 18201	N/A	PC	GENERAL PROGRAM NEEDS	2,000.
HEALING CIRCLE DROP-IN CENTER P.O. BOX 3850, NAVAJO ROUTE 531, OLD NTUA BLDG SHIPROCK, NM 87420	N/A	PC	ADVERTISE AND RECRUIT PROGRAM PARTICIPANTS IN A WELLNESS PROGRAM	2,500.
HELPING HANDS PREGNANCY RESOURCE CENTER 116 E DUSTMAN RD. SUITE B BLUFFTON, IN 46714	N/A	PC	COVID RELIEF	2,000.
HELPING HANDS 116 E DUSTMAN ROAD, SUITE B BLUFFTON, IN 46714	N/A	PC	CONTINUE TO PROVIDE A WIDE-RANGE OF SERVICES TO THOSE AFFECTED BY UNPLANNED PREGNANCY THROUGH THE PURCHASE	2,500.
HERRIN HOUSE OF HOPE 112 N. 14TH STREET HERRIN, IL 62948	N/A	PC	GENERAL PROGRAM NEEDS	2,000.
Total from continuation sheets				

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3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
HOME OF THE BRAVE FOUNDATION 6632 SHARPS ROAD MILFORD, DE 19963	N/A	PC	VETERAN PROGRAMS	2,500.
HONOR FLIGHT DAYTON 200 CANARY COURT ENON, OH 45323	N/A	PC	VETERAN PROGRAMS	2,500.
HONOR FLIGHT PITTSBURGH PO BOX 266 WEST SUNBURY, PA 16061	N/A	PC	VETERAN PROGRAMS	2,500.
HOPE AND LIFE OUTREACH 119 SOUTH BLVD SALISBURY, MD 21804	N/A	PC	EXPAND A MEN'S HOMELESS SHELTER BY ADDING SHOWERS AND BATHROOMS	8,000.
HOPE'S VOICE 1513 S WESSELL ROAD VINCENNES, IN 47591	N/A	PC	GENERAL PROGRAM NEEDS	675.
HORIZON HOUSE 1033 E WASHINGTON ST. INDIANAPOLIS, IN 46202	N/A	PC	COVID RELIEF	2,000.
HOUSING OPPORTUNITIES MADE EQUAL 1542 MAIN STREET BUFFALO, NY 14209	N/A	PC	EQUAL JUSTICE PROGRAMMING	3,000.
HUNGER FIGHT 2935 DAWN RD. JACKSONVILLE, FL 32207	N/A	PC	PURCHASE RAW INGREDIENTS FOR 18,000 MEALS AND 600 BOOKS FOR LOW INCOME FAMILIES	8,000.
HUNTINGTON COUNTY VETERANS TRANSPORT NETWORK 1330 ETNA AVENUE HUNTINGTON, IN 46750	N/A	PC	TRANSPORT VETERANS TO AND FROM APPOINTMENTS SAFELY BY PROVIDING A PHONE TO SCHEDULE THE RIDES	1,000.
IDAHO ANIMAL RESCUE NETWORK 2021 RIPON AVE. LEWISTON, ID 83501	N/A	PC	WEBSITE BUILDING	2,000.
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3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
JONNYCAKE CENTER OF WESTERLY 23 INDUSTRIAL DRIVE WESTERLY, RI 02891	N/A	PC	PURCHASE FOOD FOR FOUR EMERGENCY FOOD ASSISTANCE PROGRAMS	1,500.
JONNYCAKE CENTER OF WESTERLY 23 INDUSTRIAL DRIVE WESTERLY, RI 02891	N/A	PC	PURCHASE FOOD FOR FOUR EMERGENCY FOOD ASSISTANCE PROGRAMS	2,000.
K.I.A MEMORIAL ROADMARCH, INC. 561 MAIN ST., SUITE 1000 TONAWANDA, NY 14150	N/A	PC	GENERAL PROGRAM NEEDS	1,986.
K.I.A. MEMORIAL ROADMARCH INC. 561 MAIN STREET SUITE 1000 TONAWANDA, NY 14150	N/A	PC	VETERAN PROGRAMS	2,500.
KENDALL COUNTY COMMUNITY FOOD PANTRY 208 BEAVER ST. YORKVILLE, IL 60560	N/A	PC	COVID RELIEF	2,000.
KID CENTRIC SPORTS ASSOCIATION, INC. 6848 N. GOVERNMENT WAY, STE. 114, BOX 46 DALTON GARDENS, ID 83815	N/A	PC	FINANCIALLY ASSIST YOUTH IN NEED SO THEY ARE ABLE TO DEVELOP THEIR FINE AND GROSS MOTOR SKILLS AS THEY	1,000.
KID'S CLOSET MINISTRY 210 CENTRAL AVENUE NORTH JUDSON, IN 46366	N/A	PC	COVID RELIEF	2,000.
KID'S FOOD BASKET 1300 PLYMOUTH AVE. NE GRAND RAPIDS, MI 49505	N/A	PC	COVID RELIEF	2,000.
LA CASA DOMINICANA DE HAZLETON 32 EAST BROAD STREET HAZELTON, PA 18201	N/A	PC	EQUAL JUSTICE PROGRAMMING	6,000.
LAMP MINISTRIES INC. 851 MAIN STREET GAINESVILLE, GA 30501	N/A	PC	EDUCATIONAL ENRICHMENT OUTINGS FOR CHILDREN IN AN AFTER SCHOOL PROGRAM GIVING LOW INCOME STUDENTS	1,000.
Total from continuation sheets				

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3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
LANCASTER LGBTQ+ COALITION 342 N. QUEEN ST., STUDIO F LANCASTER, PA 17603	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
LAWNDALE CHRISTIAN LEGAL CENTER 1530 S. HAMLIN AVE. CHICAGO, IL 60623	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
LC VALLEY YOUTH RESOURCE CENTER INC 1633 10TH AVENUE LEWISTON, ID 83501	N/A	PC	PROVIDE FOOD, HYGIENE SUPPLIES, LAUNDRY SUPPLIES, CLEANING SUPPLIES, NEW UNDERGARMENTS AND	5,000.
LC VALLEY YOUTH RESOURCE CENTER INC 1633 10TH AVENUE LEWISTON, ID 83501	N/A	PC	GENERAL PROGRAM NEEDS	1,668.
LEAP FOR EDUCATION, INC. 35 CONGRESS ST. #102 SALEM, MA 01970	N/A	PC	COVID RELIEF	3,000.
LEBANON COUNTY CHRISTIAN MINISTRIES 250 S. 7TH ST. LEBANON, PA 17042	N/A	PC	GENERAL PROGRAM NEEDS	2,856.
LIDE WHITE BOYS AND GIRLS CLUB OF MADISON 1551 M.S.H. NORTHGATE RD., PO BOX 1128 MADISON, IN 47250	N/A	PC	COVID RELIEF	2,000.
LITTLEJOHN COMMUNITY CENTER 644 OLD GREENVILLE HWY CLEMSON, SC 29631	N/A	PC	GENERAL PROGRAM NEEDS	3,617.
LONGLEAF OUTREACH - THE EVERS HOUSE 433 HARRISON AVE., SUITE 1 PANAMA CITY, FL 32401	N/A	PC	REPLACE AND REPAIR A WOMEN'S TRANSITIONAL HOME FOR THOSE COMING FROM REHAB AND INCARCERATION WHICH	5,000.
LOVE D.ONT J.UDGE 5708 145TH ST NE MARYSVILLE, WA 98271	N/A	PC	GENERAL PROGRAM NEEDS	3,738.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
LYDIA'S HOUSE, INC. PO BOX 2722 ST. LOUIS, MO 63116	N/A	PC	PROVIDE A NEW MATTRESS TO RESIDENTS OF A WOMEN'S DOMESTIC VIOLENCE SHELTER	7,500.
MAC A CHEEK LEARNING CENTER 1180 WEST SANDUSKY AVENUE BELLEFONTAINE, OH 43311	N/A	PC	FACILITATE A COPING TECHNIQUE WHICH HELPS STUDENTS VISUALIZE THEIR HEART RHYTHMS AND SEE WHAT HAPPENS	2,300.
MADISON COUNTY URBAN LEAGUE 408 E. BROADWAY ALTON, IL 62002	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
MAKE-A-WISH GREATER PENNSYLVANIA AND WEST VIRGINIA INC. THE GULF TOWER, 707 GRANT ST. FLOOR 37 PITTSBURGH, PA 15219	N/A	PC	HELP GRANT THE WISHES OF TWO CHILDREN WHO HAVE EXPERIENCED A CHILDHOOD HEALTH ISSUE	10,000.
MAKE-A-WISH GREATER PENNSYLVANIA AND WEST VIRGINIA INC. THE GULF TOWER, 707 GRANT ST. FLOOR 37 PITTSBURGH, PA 15219	N/A	PC	GENERAL PROGRAM NEEDS	789.
MARYLAND FOOD BANK - EASTERN SHORE BRANCH 28500 OWENS BRANCH ROAD SALISBURY, MD 21801	N/A	PC	COVID RELIEF	2,000.
MARYS CUPBOARD 100 LEVITTOWN PARKWAY LEVITTOWN, PA 19054	N/A	PC	GENERAL PROGRAM NEEDS	399.
MBK MADE BY KIDS PO BOX 707 TWINSBURG, OH 44087	N/A	PC	CONTINUED OPERATION OF AN AFTER SCHOOL PROGRAM BY PROVIDING SUPPLIES AND TRANSPORTATION COSTS	1,000.
MEALS ON WHEELS - GRANT COUNTY 624 S. ADAMS ST. MARION, IN 46953	N/A	PC	GENERAL PROGRAM NEEDS	2,000.
MINNESOTA FREEDOM FUND PO BOX 6398 MINNEAPOLIS, MN 55406	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
MLK COMMUNITY CENTER 40 W. 40TH STREET INDIANAPOLIS, IN 46208	N/A	PC	COVID RELIEF	2,000.
MOMMA SAGES BUTTERFLY CREW 732 GORDON STREET PIQUA, OH 45356	N/A	PC	PURCHASE GIFT CARDS AND TOYS FOR CHILDREN AND FAMILIES AT DAYTON CHILDREN'S HOSPITAL	1,000.
MORE THAN A PHONE - TCC GIVES 10300 KINCAID DRIVE SUITE 203 FISHERS, IN 46037	N/A	PC	GENERAL PROGRAM NEEDS	4,182.
MOTHER SETON HOUSE, INC., T/A SETON YOUTH SERVICES 101 N. LYNNHAVEN ROAD, SUITE 101 VIRGINIA BEACH, VA 23452	N/A	PC	ASSIST YOUTH IN CRISIS WITH THE GOAL OF REUNITING FAMILIES THROUGH A YOUTH OUTREACH PROGRAM	2,000.
MY BLOCK MY HOOD MY CITY 47 W. POLK ST., SUITE 100 CHICAGO, IL 60605	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
NAACP EMPOWERMENT PROGRAM 4805 MOUNT HOPE DRIVE BALTIMORE, MD 21215	N/A	PC	EQUAL JUSTICE PROGRAMMING	6,000.
NAACP LDF 40 RECTOR STREET, 5TH FLOOR NEW YORK, NY 10006	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
NAACP LEGAL DEFENSE & EDUCATION FUND INC. 40 RECTOR STREET, 5TH FLOOR NEW YORK, NY 10006	N/A	PC	EQUAL JUSTICE PROGRAMMING	3,000.
NEVER ALONE, INC. 291 ROPE MILL ROAD WOODSTOCK, GA 30188	N/A	PC	PURCHASE FOOD DUE TO THE ANTICIPATED INCREASED DEMAND AND PRESSURE ON EMERGENCY FOOD NETWORK AS A	2,000.
NEW BRITAIN BAPTIST CHURCH 22 E BUTLER AVE. NEW BRITAIN, PA 18901	N/A	PC	GENERAL PROGRAM NEEDS	2,000.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
NEW HOPE COMMUNITY FOOD PANTRY 7115 W. HOOD AVE. CHICAGO, IL 60631	N/A	PC	COVID RELIEF	2,000.
NEW LIFE MEAL MINISTRY 323 N JEFFERSON ST. HUNTINGTON, IN 46750	N/A	PC	COVID RELIEF	2,000.
NEXT LEVEL LIFESTYLES, INC 1715 HWY 71 221 E GREENWOOD, SC 29629	N/A	PC	EQUAL JUSTICE PROGRAMMING	4,000.
NO MORE PAIN INC. 11880 BUSTLETON AVENUE PHILADELPHIA, PA 19116	N/A	PC	SUPPORT OF A HOLIDAY EVENT TO FOOD AND CLOTHE THE LOCAL HOMELESS	2,000.
NOIR BLACK CHAMBER OF COMMERCE, INC. 1515 SOUTH THIRD STREET LOUISVILLE, KY 40208	N/A	PC	EQUAL JUSTICE PROGRAMMING	3,000.
NORTH EAST INDIANA HONOR FLIGHT PO BOX 5 HUNTERTOWN, IN 46748	N/A	PC	VETERAN PROGRAMS	5,000.
NORTHWEST IOWA AMERICAN LEGION RIDERS 110 PLYMOUTH ST. SW LE MARS, IA 51031	N/A	PC	SUPPLY CLOTHING, FUNERALS, HEAT, MEDICAL BILL PAYMENT, AS WELL AS THREE YEARLY PROGRAMS FOR	5,000.
NUNDA FOOD PANTRY 7 MASSACHUSETTS NUNDA, NY 14517	N/A	PC	COVID RELIEF	2,000.
OMICRON PHI OMEGA CHAPTER OF ALPHA KAPPA ALPHA SORORITY INC PO BOX 2574 KOKOMO, IN 46904	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
ONE QUEST, INC. D/B/A C.A.R.E. CONSORTIUM 3505 PELHAM ROAD, SUITE B GREENVILLE, SC 29615	N/A	PC	SUPPORT OF A YEAR LONG PROGRAM BRINGING AWARENESS TO MENTAL HEALTH AND SUICIDE PREVENTION	2,500.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
OPERATION HOME FRONT 21 FRANKLIN STREET, SUITE 2 QUINCY, MA 02169	N/A	PC	VETERAN PROGRAMS	2,500.
OPERATION SANTA CAUSE 1925 PARK AVE., SUITE 7 ORANGE PARK, FL 32073	N/A	PC	VETERAN PROGRAMS	2,500.
OREGON JUSTICE RESOURCE CENTER PO BOX 5248 PORTLAND, OR 97208	N/A	PC	EQUAL JUSTICE PROGRAMMING	3,000.
PARALYZED VETERANS OF AMERICA NORTHWEST CHAPTER 616 SW 152ND ST., SUITE B BURIEN, WA 98166	N/A	PC	VETERAN PROGRAMS	2,500.
PARKLAND C.A.R.E.S. FOOD PANTRY 5074 KERNSVILLE RD. UNIT #4 OREFIELD, PA 18069	N/A	PC	COVID RELIEF	2,000.
PARTNERS FOR PETS 4011 MAINTENANCE DR. MARIANNA, FL 32448	N/A	PC	SPAY AND NEUTER ANIMALS AT A NO-KILL SHELTER	1,500.
PAYETTE CHURCH NAZARENE 1980 7TH AVE. N. PAYETTE, ID 83661	N/A	PC	COVID RELIEF	2,000.
PEN POINTE FOUNDATION, INC PO BOX 3292 SUWANEE, GA 30024	N/A	PC	ASSIST FORMER PRISONERS WITH TRANSITIONING BACK INTO SOCIETY AND HELP WITH JOB PLACEMENT	2,000.
PERRY COUNTY HUMANE SOCIETY 8365 ILLINOIS 14 DUQUOIN, IL 62832	N/A	PC	PROVIDE A NO-KILL ANIMAL SHELTER WITH A SANTITATION AND PLUMBING UPDATE	1,500.
PERRY-JACKSON CHILD ADVOCACY CENTER 5512 STATE ROUTE 154, PO BOX 155 PINCKNEYVILLE, IL 62274	N/A	PC	UPGRADE A HANDICAP RAMP AND PROVIDE FREE SERVICES TO CLIENTS WHO ARE VICTIMS OF SEXUAL OR PHYSICAL	2,500.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
PITTSBURGH SCHWEITZER FELLOWS PROGRAM 5614 ELGIN STREET PITTSBURGH, PA 15206	N/A	PC	EQUAL JUSTICE PROGRAMMING	3,000.
PRINCE HALL FREE & ACCEPTED MASONS FOUNDATION OF ARIZONA / MILITARY LODGE #26 6035 S 24TH ST. PHOENIX, AZ 85042	N/A	PC	VETERAN PROGRAMS	2,500.
PROJECT POOCH 15800 BOONES FERRY ROAD, SUITE A 2 LAKE OSWEGO, OR 97035	N/A	PC	IMPROVE THE MENTAL AND PHYSICAL STIMULATION OF DOGS IN A SHELTER THROUGH THE FUNDING OF AN AGILITY CENTER AND	7,000.
PROJECT THANKSGIVING NJ PMB #1155 1370 S. MAIN ROAD VINELAND, NJ 08360	N/A	PC	VETERAN PROGRAMS	2,500.
PUBLIC JUSTICE CENTER 1 NORTH CHARLES STREET, SUITE 200 BALTIMORE, MD 21201	N/A	PC	EQUAL JUSTICE PROGRAMMING	3,000.
RAY OF HOPE MISSION CENTER 960 CRAIGTOWN RD. PORT DEPOSIT, MD 21904	N/A	PC	COVID RELIEF	4,000.
RHO KAPPA LAMBDA EDUCATION FOUNDATION PO BOX 1945 DULUTH, GA 30096	N/A	PC	FUND A CODING CAMP FOR MINORITY CHILDREN AGES 6-12	1,500.
RIVER BEND FOOD RESERVOIR DBA RIVER BEND FOODBANK 4010 KIMMEL DRIVE DAVENPORT, IA 52802	N/A	PC	SUPPORT OF A FOOD INSECURE BACKPACK PROGRAM TO END CHILDHOOD HUNGER	1,500.
ROCKDALE EMERGENCY RELIEF 350 TALL OAKS DRIVE SE CONYERS, GA 30013	N/A	PC	COVID RELIEF	2,000.
RONALD MCDONALD HOUSE CHARITIES OF CENTRAL INDIANA 435 LIMESTONE ST INDIANAPOLIS, IN 46202	N/A	PC	PROVIDE SHORT-TERM CARE FOR THE FAMILY OF CHILDREN HOSPITALIZED	5,000.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
SACRED ROOTS FARM, INC. P.O. BOX 3143 GAINESVILLE, GA 30503	N/A	PC	COVER MEDICAL EXPENSES OF WOMEN AND CHILDREN WHO HAVE BEEN TRAFFICKED AND SEXUALLY EXPLOITED	2,000.
SAFE HAVEN MINISTRIES 2627 BIRCHCREST DR. SE GRAND RAPIDS, MI 49506	N/A	PC	ENSURE TELECOMMUNICATIONS ARE BEST QUALITY THEY CAN BE FOR SURVIVORS OF DOMESTIC VIOLENCE	5,000.
SAINT JOHN PAUL II FOOD PANTRY 279 HAMILTON STREET SOUTHBRIDGE,, MA 01550	N/A	PC	PURCHASE CLEANING SUPPLIES AND BAGS TO DISTRIBUTE FOR PROPER DISINFECTION AND HYGENIE ASSOCIATED	2,000.
SAINT MARY OF THE WOODS COLLEGE / GEORGE FLOYD SCHOLARSHIP SAINT MARY OF THE WOODS, OFFICE OF ADVANCEMENT, P.O. BOX 70 SAINT MARY OF THE WOODS, IN 47876	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
SAMARITAN HOUSE 12 5TH ST. DENTON, MD 21629	N/A	PC	COVID RELIEF	2,000.
SAUK CENTRE FOOD SHELF 523 SINCLAIR LEWIS AVENUE SAUK CENTRE, MN 56378	N/A	PC	COVID RELIEF	2,000.
SCHOOL ON WHEELS CORP. 2605 EAST 62ND STREET INDIANAPOLIS, IN 46220	N/A	PC	SUPPORT THE DIRECT COST OF INCREASED STUDENT ENROLLMENT IN A TUTORING PROGRAM	5,000.
SECOND HARVEST FOOD BANK 6969 SILVER CREST RD. NAZARETH , PA 18064	N/A	PC	COVID RELIEF	2,000.
SHEBOYGAN COUNTY FOOD BANK 3115 N. 21ST STREET SUITE 1 SHEBOYGAN, WI 53083	N/A	PC	PURCHASE FOOD DUE TO THE ANTICIPATED INCREASED DEMAND AND PRESSURE ON EMERGENCY FOOD NETWORK AS A	2,000.
SHELBY SENIOR SERVICES 1504 S HARRISON ST. SHELBYVILLE, IN 46176	N/A	PC	COVID RELIEF	2,000.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
SHEPHERD COMMUNITY CENTER 4107 E. WASHINGTON STREET INDIANAPOLIS, IN 46201	N/A	PC	COVID RELIEF	2,000.
SLEEP IN HEAVENLY PEACE, INC. IL-SALEM CHAPTER 1560 ELDRIDGE AVENUE TWIN FALLS, ID 64014	N/A	PC	ENSURE THAT NO CHILD SLEEPS ON THE FLOOR BY PURCHASING MATERIALS TO BUILD AND DELIVER BEGS FOR LOW INCOME	2,000.
SLEEP IN HEAVENLY PEACE PO BOX 641 SALEM, IL 62881	N/A	PC	GENERAL PROGRAM NEEDS	1,224.
SLEEP IN HEAVENLY PEACE-MO, KANSAS CITY SE 713 SE DIAMOND CT BLUE SPRINGS, MO 83301	N/A	PC	ASSURE THAT NO CHILD SLEEPS ON THE FLOOR BY PURCHASING SUPPLIES TO BUILD BUNK BEDS FOR LOW INCOME CHILDREN	5,000.
SOS CHILDREN'S VILLAGES ILLINOIS 216 W. JACKSON BLVD., SUITE 925 CHICAGO, IL 60606	N/A	PC	PROVIDE ESSENTIAL NEEDS FOR FOSTER FAMILIES AND CARE TAKERS, AS WELL AS SUPPLEMENT HOLIDAY	2,000.
SOUTHERN POVERTY LAW CENTER 400 WASHINGTON AVENUE MONTGOMERY, AL 36104	N/A	PC	EQUAL JUSTICE PROGRAMMING	6,000.
SPECIALIZED EQUINE SERVICES & THERAPEUTIC RIDING (SES) 722 GIANT CITY ROAD MAKANDA, IL 62958	N/A	PC	VETERAN PROGRAMS	2,500.
SPRING FORWARD 2101 6TH AVENUE ROCK ISLAND, IL 61201	N/A	PC	ENHANCE LITERACY AND MATH SKILLS THROUGH A SUMMER ENRICHMENT CAMP BY PURCHASING CHROME BOOKS	5,000.
ST. JOHN'S FOOD FOR THE POOR PROGRAM 20 TEMPLE STREET WORCESTER, MA 01604	N/A	PC	COVID RELIEF	2,000.
ST. JUDE 501 ST. JUDE PLACE MEMPHIS, TN 38105	N/A	PC	GENERAL PROGRAM NEEDS	1,236.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
ST. VINCENT DE PAUL 5950 FOURTH AVE. SOUTH SEATTLE, WA 98108	N/A	PC	COVID RELIEF	2,000.
STERLING ANIMAL SHELTER INC. 17 LAURELWOOD RD. STERLING, MA 01564	N/A	PC	ASSIST A NO-KILL SHELTER WITH MAINTAINING A 100% COMPLIANCE RATE ON SPAY/NEUTER OF ADOPTED	1,500.
SUCCESSTEAM 286 OLD BARNWELL RD. AIKEN, SC 29803	N/A	PC	SUPPORT OF 4 PROGRAMS FOR EDUCATIONAL YOUTH DEVELOPMENT	1,500.
SUSSEX COUNTY FOSTER PARENT ASSOCIATION PO BOX 806 GEORGETOWN, DE 19947	N/A	PC	HOST A HOLIDAY EVENT FOR CHILDREN IN FOSTER CARE	10,000.
TEAM INC 30 ELIZABETH ST. STE. 1 DERBY, CT 06418	N/A	PC	COVID RELIEF	2,000.
THE ACLU FOUNDATION 125 BROAD STREET, 18TH FLOOR NEW YORK, NY 10004	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
THE BURKE CENTER, INC. 70 HOLLOW CREST RD. TUNKHANNOCK, PA 18657	N/A	PC	PROVIDE MENTAL HEALTH SERVICES TO INDIVIDUALS WHO ARE UNDERINSURED OR UNINSURED	1,000.
THE CARING KITCHEN 300 MIAMI STREET URBANA, OH 43078	N/A	PC	COVID RELIEF	2,000.
THE CRISIS DOCTOR AND ASSOCIATES; DBA ALABAMA LAW ENFORCEMENT ALLIANCE FOR PEER SUPPORT (ALL 1450 ROSS CLARK CIRCLE, SUITE 3 DOTHAN, AL 36301	N/A	PC	PROVIDE WEEK LONG TRAINING AND SUPPORT TO LAW ENFORCEMENT OFFICERS WHO WILL THEN RESPOND TO OFFICERS	1,000.
THE DREAM BIG CENTER, INC. 2154 RUSSET MEADOWS LANE BIRMINGHAM, AL 35244	N/A	PC	GENERAL PROGRAM NEEDS	3,545.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
THE FAYETTE COUNTY HUMANE SOCIETY DBA THE FAYETTE REGIONAL HUMANE SOCIETY 153 S. MAIN STREET, SUITE 3 WASHINGTON COURT HOUSE, OH 43160	N/A	PC	PROVIDE SPAY AND NEUTER SERVICES FOR INCOME QUALIFIED PET OWNERS	2,000.
THE FOOD BARN 2900 ROSEBUD ROAD SW LOGANVILLE, GA 30052	N/A	PC	COVID RELIEF	2,000.
THE KLEIN FAMILY HARFORD CRISIS CENTER 802 BALTIMORE PIKE BEL AIR, MD 21014	N/A	PC	ADDICTION SERVICES	2,000.
THE MSA COALITION 7918 JONES BRANCH DRIVE, SUITE 300 MCLEAN, VA 22102	N/A	PC	FUND VITAL RESEARCH FOR MULTIPLE SYSTEM ATROPHY	5,000.
THE NIGHT MINISTRY 1020 WEST BRYN MAWR AVE. CHICAGO, IL 60660	N/A	PC	COVID RELIEF	2,000.
THE PAX CENTER 605 WASHINGTON ST. LAPORTE, IN 46350	N/A	PC	COVID RELIEF	2,000.
THE POLICE ACTIVITIES LEAGUE 7101 GUILFORD DRIVE STE. 200 FREDERICK, MD 21704	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
THE RIVER CHURCH 759 S LENFESTY AVENUE MARION, IN 46952	N/A	PC	SUPPORT OF A DOMESTIC VIOLENCE SURVIVOR AND HER FAMILY AFTER A TRAGIC ACCIDENT	2,000.
THE ROSE LOWENSTEIN FOUNDATION FOR CHILDHOOD CANCER AWARENESS 403 W 4TH ST CAMERON, MO 64429	N/A	PC	PROVIDE SCHOLARSHIPS TO PEDIATRIC CANCER SURVIVORS FOR COLLEGE AND/OR TRADE SCHOOL	2,000.
THE ROSS FOUNDATION 3939 NORTH ARLINGTON AVE. INDIANAPOLIS, IN 46226	N/A	PC	EQUAL JUSTICE PROGRAMMING	4,000.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
THE SALVATION ARMY 359 N. BRADNER AVE. MARION, IN 46952	N/A	PC	PURCHASE FOOD FOR A FOOD PANTRY	2,000.
THE SALVATION ARMY, THE DALLES CORP 623 E 3RD ST. THE DALLES, OR 97058	N/A	PC	COVID RELIEF	2,000.
THE SHEPHERD'S CENTER OF HAMILTON COUNTY 347 S. 8TH STREET NOBLESVILLE, IN 46060	N/A	PC	PROVIDE SHORT TERM MONETARY ASSISTANCE WITH HOME REPAIRS/MODIFICATION, APPLIANCE	2,000.
THE TREE HOUSE, INC. 173 HIGHLAND DRIVE WINDER, GA 30680	N/A	PC	SUMMER CAMP SUPPORT	1,500.
THE TREVOR PROJECT PO BOX 69232 WEST HOLLYWOOD, CA 90069	N/A	PC	EQUAL JUSTICE PROGRAMMING	3,000.
THE UNITED NEGRO COLLEGE FUND 1805 7TH ST NW WASHINGTON, DC 20001	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
TOWNSHEND COMMUNITY FOOD SHELF 46 COMMON ROAD TOWNSHEND, VT 05353	N/A	PC	COVID RELIEF	2,000.
TRIFORCE MISSION TEAM 13 E. ST. LOUIS PLACE BATESVILLE, IN 47006	N/A	PC	INSTILL VALUES AND RESPECT FOR ALL PEOPLE IN THE YOUTH THROUGH HANDS-ON SERVICE PROJECTS FOR THE	1,000.
TURNING POINTE SURVIVOR ADVOCACY CENTER 210 PACIFIC COURT, PO BOX 2014 SHELTON, WA 98338	N/A	PC	PROVIDE UPDATES AND UPGRADES TO 2 DOMESTIC VIOLENCE SHELTERS	1,000.
TURNSTONE TURNSTONE CENTER, 3320 NORTH CLINTON STREET FORT WAYNE, IN 46805	N/A	PC	GENERAL PROGRAM NEEDS	1,566.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
UNITE OREGON 1390 SE 122ND AVE. PORTLAND, OR 97233	N/A	PC	EQUAL JUSTICE PROGRAMMING	3,000.
UNITED WAY OF OHIO VALLEY 403 PARK PLAZA DRIVE OWENSBORO, KY 42301	N/A	PC	COVID RELIEF	3,500.
UNITED WAY OF WABASH VALLEY 100 S 7TH ST. TERRE HAUTE, IN 47807	N/A	PC	COVID RELIEF	2,000.
URBAN LEAGUE OF KANSAS CITY 1710 THE PASEO KANSAS CITY, MO 64108	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
URBAN LEAGUE OF THE UPSTATE 15 REGENCY HILL DR. GREENVILLE, SC 29607	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
VALOR CLINIC FOUNDATION PO BOX 315 BRODHEADSVILLE, PA 18322	N/A	PC	VETERAN PROGRAMS	2,500.
VETERANS OF FOREIGN WARS 1468 HAIGHS RD. ROME, PA 18837	N/A	PC	VETERAN PROGRAMS	2,500.
VETS GARAGE PO BOX 3551 SPOKANE, WA 99220	N/A	PC	VETERAN PROGRAMS	2,500.
VFW POST 3176 17305 SUPERIOR ROAD ST. ROBERT, MO 65584	N/A	PC	VETERAN PROGRAMS	2,500.
VINCENNES ANIMAL SHELTER 1128 RIVER RD. VINCENNES, IN 47591	N/A	PC	PURCHASE A NEW A/C UNIT FOR AN ANIMAL SHELTER	2,000.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
VOICE BUFFALO 2495 MAIN STREET, SUITE #547 BUFFALO, NY 14214	N/A	PC	EQUAL JUSTICE PROGRAMMING	3,000.
WASHINGTON COUNTY FAMILY YMCA 1709 N SHELBY ST. SALEM, IN 47167	N/A	PC	AFTER SCHOOL PROGRAMING	2,000.
WAYNE COUNTY HUMANE SOCIETY 1161 MECHANICSBURG RD. WOOSTER, OH 44691	N/A	PC	GENERAL PROGRAM NEEDS	1,836.
WENATCHEE VALLEY HUMANE SOCIETY 1474 S. WENATCHEE AVE. WENATCHEE, WA 98801	N/A	PC	HELP A NO-KILL ANIMAL SHELTER PURCHASE SURGICAL EQUIPMENT NEEDED TO EXPAND SPAY AND NEUTER SERVICES TO	2,000.
WESTERN EGYPTIAN 317 SOUTH WASHINGTON STREET DUQUOIN, IL 62832	N/A	PC	COVID RELIEF	2,000.
WISH FOR OUR HEROES FOUNDATION INC. - WOUNDED HEROES HUNT AT CAMP ATTERBURY 802 MULBERRY ST., SUITE GB - 06 NOBLESVILLE, IN 46060	N/A	PC	VETERAN PROGRAMS	2,500.
WOMEN VETERAN SOCIAL JUSTICE 3631 CHAMBLEE TUCKER RD., BLDG. A, SUITE 201 CHAMBLEE, GA 30341	N/A	PC	VETERAN PROGRAMS	2,500.
WOMEN'S CRISIS SUPPORT TEAM 612 NW 5TH STREET GRANTS PASS, OR 97526	N/A	PC	DOMESTIC VIOLENCE AWARENESS PROGRAMS	2,000.
YAVAPAI HUMANE SOCIETY 1625 SUNDG RANCH ROAD PRESCOTT, AZ 86301	N/A	PC	PROVIDE PETS WITH CARE WITH OWNERS WHO ARE FINANCIALLY DISADVANTAGED WHO WOULD OTHERWISE BE	2,000.
YAVAPAI REGIONAL MEDICAL CENTER FOUNDATION 1003 WILLOW CREEK ROAD PRESCOTT, AZ 86301	N/A	SO I	COVID RELIEF	2,000.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
YORK COUNTY FOOD BANK 254 W PRINCESS ST YORK, PA 17401	N/A	PC	COVID RELIEF	2,000.
YOU EAT I EAT 8888 DYER ST. EL PASO, TX 79904	N/A	PC	COVID RELIEF	2,000.
YOUNG & ESTABLISHED 920 LODGE AVENUE EVANSVILLE, IN 47714	N/A	PC	COVID RELIEF	2,000.
YOUNG & ESTABLISHED, INC. 920 LODGE AVENUE EVANSVILLE, IN 47714	N/A	PC	INSPIRE AND MOTIVATE YOUTH WHILE ADDRESSING THE CHALLENGES YOUNG PEOPLE FACE EVERY DAY THROUGH MENTORING	1,500.
YOUTH ENCOURAGEMENT SERVICES, INC 11636 COUNTY FARM ROAD AURORA, IN 47001	N/A	PC	PURCHASE SUPPLIES AND EQUIPMENT FOR A GREENHOUSE TO PRODUCE FOOD FOR PROGRAMMING AT AN EMERGENCY YOUTH	1,000.
YWCA OF DAYTON 141 W. THIRD STREET DAYTON, OH 45402	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
YWCA OF EVANSVILLE 118 VINE ST. EVANSVILLE, IN 47708	N/A	PC	EQUAL JUSTICE PROGRAMMING	2,000.
Total from continuation sheets				

Part XV Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - ANGELS' ARMS

FILL A WAREHOUSE WITH FOOD, CLOTHING, TOILETRIES, PAPER PRODUCTS,
DIAPERS, BEDDING, LAUNDRY DETERGENT, FURNITURE AND MORE FOR LOCAL
FOSTER CARE FAMILIES

NAME OF RECIPIENT - ANGELS IN MOTION

PURCHASE ITEMS TO BE USED FOR BLESSING BAGS WHICH ARE DISTRIBUTED TO
HOMELESS INDIVIDUALS STRUGGLING WITH ADDICTION

NAME OF RECIPIENT - ASSUMPTION BVM SCHOOL

FOSTER A NEW TECHNOLOGY NEED THROUGH THE PURCHASE OF 12 NEW LAPTOPS FOR
TEACHERS WORKING WITH VIRTUALLY LEARNING STUDENTS

NAME OF RECIPIENT - BATTLE BORNE

PROMOTE A VETERAN PEER TO PEER SUPPORT GROUP AND WORKSHOP AND SUPPORT
PROGRAMS THROUGH ASSISTANCE IN PAYING RENT

NAME OF RECIPIENT - BEST BUDDIES

HELP TO CREATE MORE INCLUSIVE SCHOOLS, COMMUNITIES, AND WORKPLACES, AS
WELL AS EXPANSION OF PROGRAMS INTO NEW SCHOOLS, COMMUNITIES AND
WORKPLACES THROUGH A SOCIAL MENTORING PROGRAM

NAME OF RECIPIENT - BRAYBOY SAFETY AGAINST DOMESTIC VIOLENCE CRISIS
CENTER

PROVIDE GUEST AND MOTIVATIONAL SPEAKERS, VENDORS, VICTIMS AND SURVIVORS
THAT HAVE EXPERIENCED FIRST HAND TEEN DATING VIOLENCE, BULLYING,
CYBER-BULLYING AND STALKING

Part XV Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - BUCKING FOR HOPE

HELP WITH THE FINANCIAL BURDEN OF PEOPLE OR FAMILIES IN NEED DUE TO A
MEDICAL EMERGENCY OR A NATURAL DISASTER

NAME OF RECIPIENT - CAMP QUALITY NORTHWEST MISSOURI

PROVIDE CHILDREN WITH CANCER AND THEIR FAMILIES WITH A CAMPING
EXPERIENCE INCLUDING A PORK CHOP BARBEQUE TO END THEIR TIME AT CAMP

NAME OF RECIPIENT - CANCER SERVICES OF GRANT COUNTY

SUPPORT OF ALL PROGRAMS FOR THOSE FACING CANCER, INCLUDING FREE
MAMMOGRAPHY, DIAGNOSTICS, PRESCRIPTIONS, CO-PAYS, TRANSPORTATION,
SUPPLIES AND EQUIPMENT

NAME OF RECIPIENT - CAROLINE'S AGAPE PROJECT, LLC

EXPAND A COMMUNITY PRODUCE GARDEN TO BENEFIT MORE LOW-INCOME FAMILIES
DEALING WITH FOOD INSECURITY

NAME OF RECIPIENT - CHILDREN'S HARBOR, INC.

REPAIR AND ENHANCEMENT OF A SWIMMING POOL AT A HANDICAP ACCESSIBLE
PEDIATRIC RETREAT FACILITY FOR CHILDREN AND THEIR FAMILY

NAME OF RECIPIENT - CHILDREN'S THERAPY CENTER OF THE QUAD CITIES

OFFSET THE COST ABSORBED BY THE PROGRAM TO CONTINUE THERAPY SUPPORT FOR
A CHILD WITH CEREBAL PALSY

NAME OF RECIPIENT - CRISTEL HOUSE INTERNATIONAL

PURCHASE CRITICAL TECHNOLOGY AND PROFESSIONAL DEVELOPMENT NEEDED FOR
AN ALTERNATIVE TEACHER PREPARATION PROGRAM COMMITTED TO HELPING TRAIN

Part XV Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

EDUCATORS TO BETTER SERVE HIGH-NEEDS, URBAN STUDENTS

NAME OF RECIPIENT - COMMUNITY HARVEST FOOD BANK OF NORTHEAST INDIANA, INC.

SUPPORT OF A FARM WAGON MOBILE PANTRY PROGRAM THAT PROVIDES HEALTHY FOOD AT NO COST TO LOW-INCOME FAMILIES

NAME OF RECIPIENT - CROSSROADS

ALLOW HIGH SCHOOL JUNIORS TO TOUR NINE NEW ENGLAND SCHOOLS AND STAY OVERNIGHT ON CAMPUSES TO EXPERIENCE COLLEGE LIFE

NAME OF RECIPIENT - FAMILY SERVICES & PREVENTION PROGRAMS

ASSIST A COMMUNITY SERVICE ORGANIZATION IN COORDINATING PROGRAMS THROUGH THE PURCHASE OF NEW COMPUTERS

NAME OF RECIPIENT - FAYETTE COUNTY COUNCIL ON DOMESTIC VIOLENCE D/B/A PROMISE PLACE

ALLOW SERVICES OF A DOMESTIC VIOLENCE EMERGENCY SHELTER TO REMAIN FREE TO CLIENTS SO THEY MAY RECOVER FROM THE TRAUMA

NAME OF RECIPIENT - FEMALE OPPORTUNITY IN RE-ENTRY (F.O.R.E)

CREATE A "CHANGE TOOL KIT" WHICH INCLUDES A SOCIAL NORMING CAMPAIGN, EDUCATIONAL MATERIALS FOR USE IN ADVOCACY AND CHANGE PLANNING, AND PLANNING EVENTS FOR PROFESSIONALS, LEADERS AND OTHER STAKEHOLDERS WORKING TO ADVANCE WOMEN AFTER INCARCERATION

NAME OF RECIPIENT - FLORIDA SKILLSUSA INC

SUPPORT OF A CAREER EXPO FOR MIDDLE SCHOOL AND HIGH SCHOOL STUDENTS TO

Part XV | **Supplementary Information**

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

LEARN THE IMPORTANCE OF THE SKILLED TRADES AND OTHER WORKPLACE OPPORTUNITIES

NAME OF RECIPIENT - FOOD 4 SOULS

CREATE A CHRIST CENTERED REFUGE WHERE INDIVIDUALS CAN WORK TOWARDS PHYSICAL, MENTAL AND SPIRITUAL RESTORATION THROUGH THE REPAIRS TO A PHYSICAL HOUSE

NAME OF RECIPIENT - FOSTERADOPT CONNECT NWMO BRANCH-CHILLICOTHE

PROVIDE FOSTER CARE FAMILIES WITH ITEMS THEY NEED TO RETURN TO A NEW SCHOOL, IN ADDITION TO ITEMS NEEDED TO MAINTAIN A FOSTER CARE LICENSE

NAME OF RECIPIENT - FRASER

PROVIDE TABLETS AND HOT SPOTS FOR FAMILIES WHO DO NOT HAVE ACCESS TO TECHNOLOGY OR WIFI FOR VIRTUAL TELEHEALTH SERVICES

NAME OF RECIPIENT - GIRLS OF GRACE FOUNDATION

CULTIVATE A CIRCLE OF SISTERHOOD IN WHICH AT-RISK TEEN GIRLS CAN BE MENTORED BY PROVIDING SAFE-HAVEN AND PREPARATION FOR COLLEGE, ENTREPRENEURSHIP, ACADEMIC ACHIEVEMENT AND SELF-ESTEEM PROGRAMMING THROUGH WEEKEND AND WEEKLY CLASSES/CONFERENCES

NAME OF RECIPIENT - GRACE POINT LEARNING CENTER & ACADEMY

PURCHASE 5 CLASSROOM COMPUTERS, FURNITURE AND PLAYGROUND EQUIPMENT FOR A CHILD CARE AND EDUCATIONAL CENTER

NAME OF RECIPIENT - GULF COUNTY SCHOOL DISTRICT

PROVIDING MEALS TO THE CHILDREN WITHIN THE GULF COUNTY SCHOOL DISTRICT

Part XV Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

COMMUNITY WHILE SCHOOL IS OUT DUE TO VIRUS

NAME OF RECIPIENT - HELPING HANDS

CONTINUE TO PROVIDE A WIDE-RANGE OF SERVICES TO THOSE AFFECTED BY
UNPLANNED PREGNANCY THROUGH THE PURCHASE OF UPDATED TECHNOLOGY SERVICES

NAME OF RECIPIENT - KID CENTRIC SPORTS ASSOCIATION, INC.

FINANCIALLY ASSIST YOUTH IN NEED SO THEY ARE ABLE TO DEVELOP THEIR FINE
AND GROSS MOTOR SKILLS AS THEY GROW AND DEVELOP TO THEIR FULL POTENTIAL

NAME OF RECIPIENT - LAMP MINISTRIES INC.

EDUCATIONAL ENRICHMENT OUTINGS FOR CHILDREN IN AN AFTER SCHOOL PROGRAM
GIVING LOW INCOME STUDENTS OPPORTUNITIES TO EXPLORE OUTSIDE OF SCHOOL

NAME OF RECIPIENT - LC VALLEY YOUTH RESOURCE CENTER INC

PROVIDE FOOD, HYGIENE SUPPLIES, LAUNDRY SUPPLIES, CLEANING SUPPLIES,
NEW UNDERGARMENTS AND FIRST AID SUPPLIES TO DISPLACED LOCAL TEENS

NAME OF RECIPIENT - LONGLEAF OUTREACH - THE EVERS HOUSE

REPLACE AND REPAIR A WOMEN'S TRANSITIONAL HOME FOR THOSE COMING FROM
REHAB AND INCARCERATION WHICH WAS DESTROYED IN HURRICANE MICHAEL

NAME OF RECIPIENT - MAC A CHEEK LEARNING CENTER

FACILITATE A COPING TECHNIQUE WHICH HELPS STUDENTS VISUALIZE THEIR
HEART RHYTHMS AND SEE WHAT HAPPENS IN THEIR BODIES WHEN THEY GET
STRESSED

NAME OF RECIPIENT - NEVER ALONE, INC.

Part XV | **Supplementary Information**

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

PURCHASE FOOD DUE TO THE ANTICIPATED INCREASED DEMAND AND PRESSURE ON EMERGENCY FOOD NETWORK AS A RESULT OF COVID

NAME OF RECIPIENT - NORTHWEST IOWA AMERICAN LEGION RIDERS

SUPPLY CLOTHING, FUNERALS, HEAT, MEDICAL BILL PAYMENT, AS WELL AS THREE YEARLY PROGRAMS FOR VETERANS IN NEED

NAME OF RECIPIENT - PERRY-JACKSON CHILD ADVOCACY CENTER

UPGRADE A HANDICAP RAMP AND PROVIDE FREE SERVICES TO CLIENTS WHO ARE VICTIMS OF SEXUAL OR PHYSICAL ABUSE

NAME OF RECIPIENT - PROJECT POOCH

IMPROVE THE MENTAL AND PHYSICAL STIMULATION OF DOGS IN A SHELTER THROUGH THE FUNDING OF AN AGILITY CENTER AND AGILITY TRAININGS

NAME OF RECIPIENT - SAINT JOHN PAUL II FOOD PANTRY

PURCHASE CLEANING SUPPLIES AND BAGS TO DISTRIBUTE FOR PROPER DISINFECTION AND HYGENIE ASSOCIATED WITH THE COVID-19 PANDEMIC

NAME OF RECIPIENT - SHEBOYGAN COUNTY FOOD BANK

PURCHASE FOOD DUE TO THE ANTICIPATED INCREASED DEMAND AND PRESSURE ON EMERGENCY FOOD NETWORK AS A RESULT OF COVID

NAME OF RECIPIENT - SLEEP IN HEAVENLY PEACE, INC. IL-SALEM CHAPTER

ENSURE THAT NO CHILD SLEEPS ON THE FLOOR BY PURCHASING MATERIALS TO BUILD AND DELIVER BEGS FOR LOW INCOME FAMILIES

NAME OF RECIPIENT - SOS CHILDREN'S VILLAGES ILLINOIS

Part XV Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

PROVIDE ESSENTIAL NEEDS FOR FOSTER FAMILIES AND CARE TAKERS, AS WELL AS
SUPPLEMENT HOLIDAY ACTIVITIES AND DINNERS

NAME OF RECIPIENT - STERLING ANIMAL SHELTER INC.

ASSIST A NO-KILL SHELTER WITH MAINTAINING A 100% COMPLIANCE RATE ON
SPAY/NEUTER OF ADOPTED ANIMALS

NAME OF RECIPIENT - THE CRISIS DOCTOR AND ASSOCIATES; DBA ALABAMA LAW
ENFORCEMENT ALLIANCE FOR P

PROVIDE WEEK LONG TRAINING AND SUPPORT TO LAW ENFORCEMENT OFFICERS WHO
WILL THEN RESPOND TO OFFICERS INVOLVED IN STRESSFUL EVENTS

NAME OF RECIPIENT - THE SHEPHERD'S CENTER OF HAMILTON COUNTY

PROVIDE SHORT TERM MONETARY ASSISTANCE WITH HOME REPAIRS/MODIFICATION,
APPLIANCE REPAIRS/REPLACEMENTS, TRANSPORTATION, MOVING EXPENSE,
CLEANING SERVICES FOR SENIORS

NAME OF RECIPIENT - TRIFORCE MISSION TEAM

INSTILL VALUES AND RESPECT FOR ALL PEOPLE IN THE YOUTH THROUGH HANDS-ON
SERVICE PROJECTS FOR THE DISADVANTAGED RESIDENTS OF COMMUNITIES

NAME OF RECIPIENT - WENATCHEE VALLEY HUMANE SOCIETY

HELP A NO-KILL ANIMAL SHELTER PURCHASE SURGICAL EQUIPMENT NEEDED TO
EXPAND SPAY AND NEUTER SERVICES TO OWNED PETS IN THE COMMUNITY

NAME OF RECIPIENT - YAVAPAI HUMANE SOCIETY

PROVIDE PETS WITH CARE WITH OWNERS WHO ARE FINANCIALLY DISADVANTAGED
WHO WOULD OTHERWISE BE UNABLE TO AFFORD NEEDED CARE FOR UNFORESEEN

Part XV | **Supplementary Information**

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

INJURY OR ILLNESS

NAME OF RECIPIENT - YOUNG & ESTABLISHED, INC.

INSPIRE AND MOTIVATE YOUTH WHILE ADDRESSING THE CHALLENGES YOUNG PEOPLE
FACE EVERY DAY THROUGH MENTORING PROGRAMS

NAME OF RECIPIENT - YOUTH ENCOURAGEMENT SERVICES, INC

PURCHASE SUPPLIES AND EQUIPMENT FOR A GREENHOUSE TO PRODUCE FOOD FOR
PROGRAMMING AT AN EMERGENCY YOUTH SHELTER

Schedule B

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

Department of the Treasury
Internal Revenue Service

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

2020

Name of the organization

ROUND ROOM GIVES, INC.

Employer identification number

84-4783133

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 33 1/3% 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 totaling \$5,000 or more during the year ▶ \$ _____

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 ROUND ROOM GIVES, INC.	Employer identification number 84-4783133
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	THE CELLULAR CONNECTION 10300 KINCAID DRIVE SUITE 100 FISHERS, IN 46037	\$ 1,200,236.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization ROUND ROOM GIVES, INC.	Employer identification number 84-4783133
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____

Name of organization ROUND ROOM GIVES, INC.	Employer identification number 84-4783133
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

FORM 990-PF	OTHER PROFESSIONAL FEES			STATEMENT 1
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
SERVICE FEES	293.	0.		0.
PROFESSIONAL FEES	81.	0.		0.
TO FORM 990-PF, PG 1, LN 16C	374.	0.		0.

FORM 990-PF	OTHER EXPENSES			STATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OFFICE SUPPLIES	3,547.	0.		0.
BANK FEES	1,643.	0.		0.
TO FORM 990-PF, PG 1, LN 23	5,190.	0.		0.

FORM 990-PF	OTHER LIABILITIES		STATEMENT 3
DESCRIPTION	BOY AMOUNT	EOY AMOUNT	
RELATED PARTY PAYABLE	0.	310,000.	
TOTAL TO FORM 990-PF, PART II, LINE 22	0.	310,000.	

NAME OF CONTRIBUTOR

ADDRESS

THE CELLULAR CONNECTION

525 CONGRESSIONAL BLVD
CARMEL, IN 46032

JULIE MOOREHEAD

525 CONGRESSIONAL BLVD
CARMEL, IN 46032

SCOTT MOOREHEAD

525 CONGRESSIONAL BLVD
CARMEL, IN 46032

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

ROUND ROOM GIVES, INC
10300 KINCAID DRIVE SUITE 203
FISHERS, IN 46037

TELEPHONE NUMBER

NAME OF GRANT PROGRAM

317-417-2674

TCC GIVES COMMUNITY GRANTS

FORM AND CONTENT OF APPLICATIONS

THROUGH SHARED PASSIONS OF THE ROUND ROOM FAMILY OF COMPANY'S EMPLOYEES AND CUSTOMERS, WE BELIEVE WE CAN MAKE OUR COMMUNITIES BETTER.

AN ONLINE FORM CAN BE FOUND ON [HTTPS://WWW.TCCROCKS.COM/COMMUNITY-GRANTS/](https://www.tccrocks.com/community-grants/) AND MUST BE FILLED OUT BY THE NONPROFIT BY THE DEADLINE. NONPROFIT MUST FIND A TCC EMPLOYEE SPONSOR WHO ALSO NEEDS TO FILL OUT THEIR PORTION OF THE ONLINE APPLICATION BY THE DEADLINE.

THE GRANT APPLICATIONS ARE REVIEWED INTERNALLY UPON SUBMISSION FOR COMPLETENESS AND TO ENSURE THE ORGANIZATION QUALIFIES FOR THE GRANT BASED ON OUR GUIDELINES MENTIONED ABOVE PRIOR TO BEING PRESENTED TO THE GRANTS COMMITTEE QUARTERLY WHO SELECT/VOTES ON WHICH GRANTS WILL BE AWARDED FOR THE QUARTER.

ANY SUBMISSION DEADLINES

ONGOING

RESTRICTIONS AND LIMITATIONS ON AWARDS

MUST BE 501C3; MUST HAVE A TCC EMPLOYEE SPONSOR; DOES NOT FUND SALARIES/BENEFITS, INTERNATIONAL PROGRAMS, FUNDRAISING EVENTS OR ANY LOBBYING PROGRAMS.

NAME OF MANAGER

SCOTT MOOREHEAD
JULIE MOOREHEAD

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION
PART XV, LINES 2A - 2D (CONTINUATION)

STATEMENT 7

NAME OR DESCRIPTION OF GRANT PROGRAM

TCC GIVES COMMUNITY GRANTS

FORM AND CONTENT OF APPLICATIONS

GENERAL EXPLANATION

STATEMENT 8

FORM/LINE IDENTIFIER

FORM 990-PF, PART VII-B, LINES 1A(3) AND 1B

EXPLANATION:

PART VII-B, LINE 1A(3) HAS BEEN ANSWERED "YES" BECAUSE THE CELLULAR CONNECTION (TCC) IS A SUBSTANTIAL CONTRIBUTOR TO ROUND ROOM GIVES AND IS 100% OWNED BY SCOTT AND JULIE MOORHEAD WHO ARE THEREFORE DISQUALIFIED PERSONS. THEY PROVIDE "SERVICE" TO THE ORGANIZATION BY PROVIDING UNREIMBURSED EMPLOYEE TIME, KEEPING ITS BOOKS AND SERVING ON ITS BOARD. LINE 1B IS ANSWERED "NO" BECAUSE THESE SERVICES ARE EXCEPTED BY THE REGULATIONS UNDER SECTION 4941.

Return of Certain Excise Taxes Under Chapters 41 and 42 of the Internal Revenue Code

(Sections 170(f)(10), 664(c)(2), 4911, 4912, 4941, 4942, 4943, 4944, 4945, 4955, 4958, 4959, 4960, 4965, 4966, 4967, and 4968)

2020

Department of the Treasury
Internal Revenue Service

▶ Go to www.irs.gov/Form4720 for instructions and the latest information.

For calendar year 2020 or other tax year beginning _____, 2020, and ending _____,

Name of organization, entity, or person subject to tax

EIN or SSN
84-4783133

ROUND ROOM GIVES, INC.

Amended return

Number, street, and room or suite no. (or P.O. box if mail is not delivered to street address)

10300 KINCAID DRIVE SUITE 203

Check box for type of annual return:

Form 990 Form 990-EZ

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

FISHERS, IN 46037

Form 990-PF Other

Form 5227

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

A Is the organization a foreign private foundation within the meaning of section 4948(b)?

Show conversion rate to U.S. dollars. See instructions ▶ _____

B Has corrective action been taken on any taxable event that resulted in Chapter 42 taxes being reported on this form?

If "Yes," attach a detailed description of the corrective action taken and, if applicable, enter the fair market value of any property recovered as a result of the correction ▶ \$ 2,000. . If "No," (that is, any uncorrected acts or transactions), attach an explanation (see instructions).

Part I Taxes on Organization (Sections 170(f)(10), 664(c)(2), 4911(a), 4912(a), 4942(a), 4943(a), 4944(a)(1), 4945(a)(1), 4955(a)(1), 4959, 4960(a), 4965(a)(1), 4966(a)(1), and 4968(a))

1	Tax on undistributed income - Schedule B, line 4	1	
2	Tax on excess business holdings - Schedule C, line 7	2	
3	Tax on investments that jeopardize charitable purpose - Schedule D, Part I, column (e)	3	
4	Tax on taxable expenditures - Schedule E, Part I, column (g)	4	400.
5	Tax on political expenditures - Schedule F, Part I, column (e)	5	
6	Tax on excess lobbying expenditures - Schedule G, line 4	6	
7	Tax on disqualifying lobbying expenditures - Schedule H, Part I, column (e)	7	
8	Tax on premiums paid on personal benefit contracts	8	
9	Tax on being a party to prohibited tax shelter transactions - Schedule J, Part I, column (h)	9	
10	Tax on taxable distributions - Schedule K, Part I, column (f)	10	
11	Tax on a charitable remainder trust's unrelated business taxable income. Attach statement	11	
12	Tax on failure to meet the requirements of section 501(r)(3) - Schedule M, Part II, line 2	12	
13	Tax on excess executive compensation - Schedule N	13	
14	Tax on net investment income of private colleges and universities - Schedule O	14	
15	Total (add lines 1 - 14)	15	400.

Part II Taxes on a Manager, Self-Dealer, Disqualified Person, Donor, Donor Advisor, or Related Person

(Sections 4912(b), 4941(a), 4944(a)(2), 4945(a)(2), 4955(a)(2), 4958(a), 4965(a)(2), 4966(a)(2), and 4967(a))

Name and address of related organization; city or town, state or province, country, ZIP or foreign postal code

Employer identification number

1	Tax on self-dealing - Schedule A, Part II, column (d); and Part III, column (d)	1	
2	Tax on investments that jeopardize charitable purposes - Schedule D, Part II, column (d)	2	
3	Tax on taxable expenditures - Schedule E, Part II, column (d)	3	
4	Tax on political expenditures - Schedule F, Part II, column (d)	4	
5	Tax on disqualifying lobbying expenditures - Schedule H, Part II, column (d)	5	
6	Tax on excess benefit transactions - Schedule I, Part II, column (d); and Part III, column (d)	6	
7	Tax on being a party to prohibited tax shelter transactions - Schedule J, Part II, column (d)	7	
8	Tax on taxable distributions - Schedule K, Part II, column (d)	8	
9	Tax on prohibited benefits - Schedule L, Part II, column (d); and Part III, column (d)	9	
10	Total - Add lines 1 through 9	10	

Part III Tax Payments

1	Total tax (Part I, line 15 or Part II, line 10)	1	400.
2	Total payments including amount paid with Form 8868 (see instructions)	2	
3	Tax due. If line 1 is larger than line 2, enter amount owed (see instructions)	3	400.
4	Overpayment. If line 1 is smaller than line 2, enter the difference. This is your refund	4	

LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 4720 (2020)

SCHEDULE A - Initial Taxes on Self-Dealing (Section 4941)

Part I Acts of Self-Dealing and Tax Computation			
(a) Act number	(b) Date of act	(c) Description of act	
1			
2			
3			
4			
5			
(d) Question number from Form 990-PF, Part VII-B, or Form 5227, Part VI-B, applicable to the act		(e) Amount involved in act	(f) Initial tax on self-dealer (10% of col. (e))

Part II Summary of Tax Liability of Self-Dealers and Proration of Payments			
(a) Names of self-dealers liable for tax	(b) Act no. from Part I, col. (a)	(c) Tax from Part I, col. (f), or prorated amount	(d) Self-dealer's total tax liability (add amounts in col. (c)) (see instructions)

Part III Summary of Tax Liability of Foundation Managers and Proration of Payments			
(a) Names of foundation managers liable for tax	(b) Act no. from Part I, col. (a)	(c) Tax from Part I, col. (g), or prorated amount	(d) Manager's total tax liability (add amounts in col. (c)) (see instructions)

SCHEDULE B - Initial Tax on Undistributed Income (Section 4942)

1	Undistributed income for years before 2019 (from Form 990-PF for 2020, Part XIII, line 6d)	1	
2	Undistributed income for 2019 (from Form 990-PF for 2020, Part XIII, line 6e)	2	
3	Total undistributed income at end of current tax year beginning in 2020 and subject to tax under section 4942 (add lines 1 and 2)	3	
4	Tax - Enter 30% of line 3 here and on Part I, line 1	4	

SCHEDULE C - Initial Tax on Excess Business Holdings (Section 4943)

Business Holdings and Computation of Tax

If you have taxable excess holdings in more than one business enterprise, attach a separate schedule for each enterprise. Refer to the instructions for each line item before making any entries.

Name and address of business enterprise

Employer identification number

Form of enterprise (corporation, partnership, trust, joint venture, sole proprietorship, etc.)

		(a) Voting stock (profits interest or beneficial interest)	(b) Value	(c) Nonvoting stock (capital interest)
1	Foundation holdings in business enterprise	1		
2	Permitted holdings in business enterprise	2		
3	Value of excess holdings in business enterprise	3		
4	Value of excess holdings disposed of within 90 days; or, other value of excess holdings not subject to section 4943 tax (attach statement)	4		
5	Taxable excess holdings in business enterprise - line 3 minus line 4	5		
6	Tax - Enter 10% of line 5	6		
7	Total tax - Add amounts on line 6, columns (a), (b), and (c); enter total here and on Part I, line 2	7		

SCHEDULE D - Initial Taxes on Investments That Jeopardize Charitable Purpose (Section 4944)

Part I Investments and Tax Computation

(a) Investment number	(b) Date of investment	(c) Description of investment	(d) Amount of investment	(e) Initial tax on foundation (10% of col. (d))	(f) Initial tax on foundation managers (if applicable) - (lesser of \$10,000 or 10% of col. (d))
1					
2					
3					
4					
5					
Total - Column (e). Enter here and on Part I, line 3					
Total - Column (f). Enter total (or prorated amount) here and in Part II, column (c), below					

Part II Summary of Tax Liability of Foundation Managers and Proration of Payments

(a) Names of foundation managers liable for tax	(b) Investment no. from Part I, col. (a)	(c) Tax from Part I, col. (f), or prorated amount	(d) Manager's total tax liability (add amounts in col. (c)) (see instructions)

SCHEDULE E - Initial Taxes on Taxable Expenditures (Section 4945)

Part I Expenditures and Computation of Tax				
(a) Item number	(b) Amount	(c) Date paid or incurred	(d) Name and address of recipient	(e) Description of expenditure and purposes for which made
1				
2				
3				
4				
5			SEE STATEMENT 2	
(f) Question number from Form 990-PF, Part VII-B, or Form 5227, Part VI-B, applicable to the expenditure			(g) Initial tax imposed on foundation (20% of col. (b))	(h) Initial tax imposed on foundation managers (if applicable)- (lesser of \$10,000 or 5% of col. (b))
Total - Column (g). Enter here and on Part I, line 4			400.	
Total - Column (h). Enter total (or prorated amount) here and in Part II, column (c), below				

Part II Summary of Tax Liability of Foundation Managers and Proration of Payments			
(a) Names of foundation managers liable for tax	(b) Item no. from Part I, col. (a)	(c) Tax from Part I, col. (h), or prorated amount	(d) Manager's total tax liability (add amounts in col. (c)) (see instructions)

SCHEDULE F - Initial Taxes on Political Expenditures (Section 4955)

Part I Expenditures and Computation of Tax					
(a) Item number	(b) Amount	(c) Date paid or incurred	(d) Description of political expenditure	(e) Initial tax imposed on organization or foundation (10% of col. (b))	(f) Initial tax imposed on managers (if applicable) (lesser of \$5,000 or 2½% of col. (b))
1					
2					
3					
4					
5					
Total - Column (e). Enter here and on Part I, line 5					
Total - Column (f). Enter total (or prorated amount) here and in Part II, column (c), below					

Part II Summary of Tax Liability of Organization Managers or Foundation Managers and Proration of Payments			
(a) Names of organization managers or foundation managers liable for tax	(b) Item no. from Part I, col. (a)	(c) Tax from Part I, col. (f), or prorated amount	(d) Manager's total tax liability (add amounts in col. (c)) (see instructions)

SCHEDULE G - Tax on Excess Lobbying Expenditures (Section 4911)

1	Excess of grass roots expenditures over grass roots nontaxable amount (from Schedule C (Form 990 or 990-EZ), Part II-A, column (b), line 1h). (See the instructions before making an entry.)	1
2	Excess of lobbying expenditures over lobbying nontaxable amount (from Schedule C (Form 990 or 990-EZ), Part II-A, column (b), line 1i). (See the instructions before making an entry.)	2
3	Excess lobbying expenditures - enter the larger of line 1 or line 2	3
4	Tax - Enter 25% of line 3 here and on Part I, line 6	4

SCHEDULE H - Taxes on Disqualifying Lobbying Expenditures (Section 4912)

Part I Expenditures and Computation of Tax					
(a) Item number	(b) Amount	(c) Date paid or incurred	(d) Description of lobbying expenditures	(e) Tax imposed on organization (5% of col. (b))	(f) Tax imposed on organization managers (if applicable) - (5% of col. (b))
1					
2					
3					
4					
5					
Total - Column (e). Enter here and on Part I, line 7					
Total - Column (f). Enter total (or prorated amount) here and in Part II, column (c), below					

Part II Summary of Tax Liability of Organization Managers and Proration of Payments			
(a) Names of organization managers liable for tax	(b) Item no. from Part I, col. (a)	(c) Tax from Part I, col. (f), or prorated amount	(d) Manager's total tax liability (add amounts in col. (c)) (see instructions)

SCHEDULE I - Initial Taxes on Excess Benefit Transactions (Section 4958)

Part I Excess Benefit Transactions and Tax Computation		
(a) Transaction number	(b) Date of transaction	(c) Description of transaction
1		
2		
3		
4		
5		
(d) Amount of excess benefit	(e) Initial tax on disqualified persons (25% of col. (d))	(f) Tax on organization managers (if applicable) (lesser of \$20,000 or 10% of col. (d))

SCHEDULE I - Initial Taxes on Excess Benefit Transactions (Section 4958) *Continued*

Part II Summary of Tax Liability of Disqualified Persons and Proration of Payments			
(a) Names of disqualified persons liable for tax	(b) Trans. no. from Part I, col. (a)	(c) Tax from Part I, col. (e), or prorated amount	(d) Disqualified person's total tax liability (add amounts in col. (c)) (see instructions)

Part III Summary of Tax Liability of 501(c)(3), (c)(4) & (c)(29) Organization Managers and Proration of Payments			
(a) Names of 501(c)(3), (c)(4) & (c)(29) organization managers liable for tax	(b) Trans. no. from Part I, col. (a)	(c) Tax from Part I, col. (f), or prorated amount	(d) Manager's total tax liability (add amounts in col. (c)) (see instructions)

SCHEDULE J - Taxes on Being a Party to Prohibited Tax Shelter Transactions (Section 4965)

Part I Prohibited Tax Shelter Transactions (PTST) and Tax Imposed on the Tax-Exempt Entity (see instructions)				
(a) Transaction number	(b) Transaction date	(c) Type of transaction 1 - Listed 2 - Subsequently listed 3 - Confidential 4 - Contractual protection	(d) Description of transaction	
1				
2				
3				
4				
5				
(e) Did the tax-exempt entity know or have reason to know this transaction was a PTST when it became a party to the transaction? Answer Yes or No		(f) Net income attributable to the PTST	(g) 75% of proceeds attributable to the PTST	(h) Tax imposed on the tax-exempt entity (see instructions)
Total - Column (h). Enter here and on Part I, line 9				

SCHEDULE L - Taxes on Prohibited Benefits Distributed From Donor Advised Funds (Section 4967).

See the instructions.

Part I Prohibited Benefits and Tax Computation		
(a) Item number	(b) Date of prohibited benefit	(c) Description of benefit
1		
2		
3		
4		
5		
(d) Amount of prohibited benefit	(e) Tax on donors, donor advisors, or related persons (125% of col. (d)) (see instructions)	(f) Tax on fund managers (if applicable) (lesser of 10% of col. (d) or \$10,000) (see instructions)

Part II Summary of Tax Liability of Donors, Donor Advisors, Related Persons, and Proration of Payments			
(a) Names of donors, donor advisors, or related persons liable for tax	(b) Item no. from Part I, col. (a)	(c) Tax from Part I, col. (e) or prorated amount	(d) Donor's, donor advisor's, or related person's total tax liability (add amounts in col. (c)) (see instructions)

Part III Summary of Tax Liability of Fund Managers and Proration of Payments			
(a) Names of fund managers liable for tax	(b) Item no. from Part I, col. (a)	(c) Tax from Part I, col. (f) or prorated amount	(d) Fund manager's total tax liability (add amounts in col. (c)) (see instructions)

Schedule M - Tax on Hospital Organization for Failure to Meet the Community Health Needs Assessment Requirements (Sections 4959 and 501(r)(3)). (See instructions.)

Part I Failures to Meet Section 501(r)(3)

(a) Item number	(b) Name of hospital facility	(c) Description of the failure	(d) Tax year hospital facility last conducted a CHNA	(e) Tax year hospital facility last adopted an implementation strategy
1				
2				
3				
4				
5				

Part II Computation of Tax

1	Number of hospital facilities operated by the hospital organization that failed to meet the Community Health Needs Assessment requirements of section 501(r)(3)	1
2	Tax - Enter \$50,000 multiplied by line 1 here and on Part I, line 12	2

SCHEDULE N - Tax on Excess Executive Compensation (Section 4960). (See instructions.)

(a) Item number	(b) Name of covered employee	(c) Excess remuneration	(d) Excess parachute payment	(e) Total. Add column (c) and (d)
1				
2				
3				
4				
5				
6	Attachment, if necessary. See instructions			
Total (add column (e) items 1 - 6)				
Tax. Enter 21% of the amount above here and on Part I, line 13				

SCHEDULE O - Excise Tax on Net Investment Income of Private Colleges and Universities (Section 4968)

	(a) Name	(b) EIN	(c) Gross investment income (See instructions.)	(d) Capital gain net income	(e) Administrative expenses allocable to income included in cols. (c) and (d)	(f) Net investment income (See instructions.)
1	Filing Organization					
2	Related Organization					
3	Related Organization					
4	Related Organization					
5	Total from attachment, if necessary					
6	Total					
7	Excise Tax on Net Investment Income. Enter 1.4% of the amount in 6(f) here and on Part I, line 14					

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 Here

Signature of officer or trustee	EXECUTIVE DIRECTOR Title	Date
Signature (and organization or entity name if applicable) of manager, self-dealer, disqualified person, donor, donor advisor, or related person		

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

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
CASSE TATE	CASSE TATE	11/10/21		P01271193
Firm's name ▶			Firm's EIN ▶	
KSM BUSINESS SERVICES, INC			35-2123203	
Firm's address ▶			Phone no.	
PO BOX 40857 INDIANAPOLIS, IN 46240			(317) 580-2000	

Form 4720 (2020)

FOOTNOTES

STATEMENT 1

FORM 4720 QUESTION B - DESCRIPTION OF CORRECTED TRANSACTION:
THE TRANSACTIONS REPORTED ON SCHEDULE E PART I HAVE BEEN
CORRECTED. THE FOUNDATION RECOVERED THE FOLLOWING AMOUNTS:

BLACK LIVES MATTER SC- PRIVATE FOUNDATION:

2,000.

FORM 4720 SCHEDULE E - INITIAL TAXES ON TAXABLE EXPENDITURES STATEMENT 2

(A) ITEM NUMBER (B) AMOUNT (C) DATE PAID OR INCURRED

1 2,000. 09/30/20

(D) NAME AND ADDRESS OF RECIPIENT

BLACK LIVES MATTER SC

1000 POPULAR ST.
CACYCE, SOUTH CAROLINA, 29033

(E) DESCRIPTION OF EXPENDITURE AND PURPOSE FOR WHICH MADE

GRANT TO ORGANIZATION

(F) QUESTION NUMBER (G) INITIAL TAX IMPOSED ON FOUNDATION (H) INITIAL TAX IMPOSED ON FOUNDATION MANAGERS

5(A)4 400.

TOTAL INITIAL TAX 400.