

**Return of Private Foundation**

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

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Go to [www.irs.gov/Form990PF](http://www.irs.gov/Form990PF) for instructions and the latest information.

**2022**

Open to Public Inspection

Form **990-PF**

Department of the Treasury  
Internal Revenue Service

For calendar year 2022 or tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

|   |   |  |
|---|---|--|
| Name of foundation<br><b>ROUND ROOM GIVES, INC.</b>   |   | <b>A Employer identification number</b><br><b>84-4783133</b>   |
| Number and street (or P.O. box number if mail is not delivered to street address)<br><b>10300 KINCAID DRIVE SUITE 203</b>   | Room/suite  | <b>B Telephone number</b><br><b>844-822-7625</b>   |
| City or town, state or province, country, and ZIP or foreign postal code<br><b>FISHERS, IN 46037</b>  |   | <b>C</b> If exemption application is pending, check here ... <input type="checkbox"/>  |
| <b>G</b> Check all that apply:<br><input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity<br><input type="checkbox"/> Final return <input type="checkbox"/> Amended return<br><input type="checkbox"/> Address change <input type="checkbox"/> Name change |   | <b>D 1.</b> Foreign organizations, check here ..... <input type="checkbox"/><br><br><b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation ..... <input type="checkbox"/> |
| <b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation<br><input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation  |   | <b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here ... <input type="checkbox"/>   |
| <b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16)<br>\$ <b>2,584,213.</b>   | <b>J</b> Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual<br><input type="checkbox"/> Other (specify) _____<br>(Part I, column (d), must be on cash basis.) | <b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ... <input type="checkbox"/>  |

| <b>Part I Analysis of Revenue and Expenses</b><br><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) |
|---|--|------------------------------------|---------------------------|-------------------------|---|
| <b>Revenue</b>  | <b>1</b> Contributions, gifts, grants, etc., received .....                                | 2,769,038.                         |                           | N/A                     |   |
|   | <b>2</b> Check <input type="checkbox"/> if the foundation is not required to attach Sch. B |                                    |                           |                         |   |
|   | <b>3</b> Interest on savings and temporary cash investments .....                          |                                    |                           |                         |   |
|   | <b>4</b> Dividends and interest from securities .....                                      |                                    |                           |                         |   |
|   | <b>5a</b> Gross rents .....  |                                    |                           |                         |   |
|   | <b>b</b> Net rental income or (loss) .....   |                                    |                           |                         |   |
|   | <b>6a</b> Net gain or (loss) from sale of assets not on line 10 .....                      |                                    |                           |                         |   |
|   | <b>b</b> Gross sales price for all assets on line 6a .....                                 |                                    |                           |                         |   |
|   | <b>7</b> Capital gain net income (from Part IV, line 2) .....                              |                                    | 0.                        |                         |   |
|   | <b>8</b> Net short-term capital gain .....   |                                    |                           |                         |   |
|   | <b>9</b> Income modifications .....  |                                    |                           |                         |   |
|   | <b>10a</b> Gross sales less returns and allowances .....                                   |                                    |                           |                         |   |
| <b>b</b> Less: Cost of goods sold .....   |  |                                    |                           |                         |   |
| <b>c</b> Gross profit or (loss) .....   |  |                                    |                           |                         |   |
| <b>11</b> Other income .....  | 56,431.  | 0.                                 |                           | <b>STATEMENT 1</b>      |   |
| <b>12 Total.</b> Add lines 1 through 11 .....   | 2,825,469.   | 0.                                 |                           |                         |   |
| <b>Operating and Administrative Expenses</b>  | <b>13</b> Compensation of officers, directors, trustees, etc. ....                         | 0.                                 | 0.                        |                         | 0.  |
|   | <b>14</b> Other employee salaries and wages .....  |                                    |                           |                         |   |
|   | <b>15</b> Pension plans, employee benefits .....   |                                    |                           |                         |   |
|   | <b>16a</b> Legal fees .....  |                                    |                           |                         |   |
|   | <b>b</b> Accounting fees ..... <b>STMT 2</b>   | 5,112.                             | 0.                        |                         | 0.  |
|   | <b>c</b> Other professional fees ..... <b>STMT 3</b>                                       | 5,681.                             | 0.                        |                         | 0.  |
|   | <b>17</b> Interest .....   |                                    |                           |                         |   |
|   | <b>18</b> Taxes .....  |                                    |                           |                         |   |
|   | <b>19</b> Depreciation and depletion .....   |                                    |                           |                         |   |
|   | <b>20</b> Occupancy .....  |                                    |                           |                         |   |
|   | <b>21</b> Travel, conferences, and meetings .....  |                                    |                           |                         |   |
|   | <b>22</b> Printing and publications .....  |                                    |                           |                         |   |
|   | <b>23</b> Other expenses ..... <b>STMT 4</b>   | 49,117.                            | 0.                        |                         | 0.  |
|   | <b>24 Total operating and administrative expenses.</b> Add lines 13 through 23 .....       | 59,910.                            | 0.                        |                         | 0.  |
|   | <b>25</b> Contributions, gifts, grants paid .....  | 1,635,908.                         |                           |                         | 1,635,908.  |
| <b>26 Total expenses and disbursements.</b> Add lines 24 and 25 .....   | 1,695,818.   | 0.                                 |                           | 1,635,908.              |   |
| <b>27</b> Subtract line 26 from line 12:  |  |                                    |                           |                         |   |
| <b>a</b> Excess of revenue over expenses and disbursements ...  | 1,129,651.   |                                    |                           |                         |   |
| <b>b Net investment income</b> (if negative, enter -0-) .....   |  | 0.                                 |                           |                         |   |
| <b>c Adjusted net income</b> (if negative, enter -0-) .....   |  |                                    | N/A                       |                         |   |

| 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 .....   | 1,243,522.   | 2,584,213.     | 2,584,213.            |
|   | 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 .....   |  |                |                       |
|   | 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 <b>Total assets</b> (to be completed by all filers - see the instructions. Also, see page 1, item I) ..... | 1,243,522.  | 2,584,213.   | 2,584,213.     |                       |
| Liabilities   | 17 Accounts payable and accrued expenses .....  | 51,385.  | 215,934.       |                       |
|   | 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 <b>STATEMENT 5</b> ) .....   | 829.   | 47,320.        |                       |
| 23 <b>Total liabilities</b> (add lines 17 through 22) .....   | 52,214.   | 263,254.   |                |                       |
| Net Assets or Fund Balances   | <b>Foundations that follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 24, 25, 29, and 30.</b>              |  |                |                       |
|   | 24 Net assets without donor restrictions .....  |  |                |                       |
|   | 25 Net assets with donor restrictions .....   |  |                |                       |
|   | <b>Foundations that do not follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 26 through 30.</b> |  |                |                       |
|   | 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 .....   | 1,191,308.   | 2,320,959.     |                       |
| 29 <b>Total net assets or fund balances</b> .....   | 1,191,308.  | 2,320,959.   |                |                       |
| 30 <b>Total liabilities and net assets/fund balances</b> .....  | 1,243,522.  | 2,584,213.   |                |                       |

**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 | 1,191,308. |
| 2 Enter amount from Part I, line 27a .....   | 2 | 1,129,651. |
| 3 Other increases not included in line 2 (itemize) .....   | 3 | 0.         |
| 4 Add lines 1, 2, and 3 .....  | 4 | 2,320,959. |
| 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 | 2,320,959. |

**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<br>P - Purchase<br>D - Donation | (c) Date acquired<br>(mo., day, yr.)  | (d) Date sold<br>(mo., day, yr.) |
|---|---|--|---|----------------------------------|
| 1a  |   |  |   |                                  |
| b   | NONE  |  |   |                                  |
| c   |   |  |   |                                  |
| d   |   |  |   |                                  |
| e   |   |  |   |                                  |
| (e) Gross sales price   | (f) Depreciation allowed<br>(or allowable)  | (g) Cost or other basis<br>plus expense of sale  | (h) Gain or (loss)<br>((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<br>col. (k), but not less than -0-) or<br>Losses (from col. (h)) |                                  |
| (i) FMV as of 12/31/69  | (j) Adjusted basis<br>as of 12/31/69  | (k) Excess of col. (i)<br>over col. (j), if any  |   |                                  |
| a   |   |  |   |                                  |
| b   |   |  |   |                                  |
| c   |   |  |   |                                  |
| d   |   |  |   |                                  |
| e   |   |  |   |                                  |
| 2   | Capital gain net income or (net capital loss)<br>{ If gain, also enter in Part I, line 7<br>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):<br>If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in<br>Part I, line 8 ..... |  | 3   |                                  |

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

|    |   |    |    |
|----|---|----|----|
| 1a | Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1.<br>Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instructions) | 1  | 0. |
| b  | All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations,<br>enter 4% (0.04) of Part I, line 12, col. (b) .....  |    |    |
| 2  | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) .....  | 2  | 0. |
| 3  | Add lines 1 and 2 .....   | 3  | 0. |
| 4  | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) .....  | 4  | 0. |
| 5  | <b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- .....  | 5  | 0. |
| 6  | Credits/Payments:   |    |    |
| a  | 2022 estimated tax payments and 2021 overpayment credited to 2022 .....   | 6a | 0. |
| b  | Exempt foreign organizations - tax withheld at source .....   | 6b | 0. |
| c  | Tax paid with application for extension of time to file (Form 8868) .....   | 6c | 0. |
| d  | Backup withholding erroneously withheld .....   | 6d | 0. |
| 7  | Total credits and payments. Add lines 6a through 6d .....   | 7  | 0. |
| 8  | Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached .....  | 8  | 0. |
| 9  | <b>Tax due.</b> If the total of lines 5 and 8 is more than 7, enter <b>amount owed</b> .....  | 9  | 0. |
| 10 | <b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> .....   | 10 |    |
| 11 | Enter the amount of line 10 to be: <b>Credited to 2023 estimated tax</b> <span style="float: right;">Refunded</span>  | 11 |    |

**Part VI-A Statements Regarding Activities**

|    |   | Yes | No  |
|----|---|-----|-----|
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? .....  |     | X   |
| 1b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition .....<br>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. |     | X   |
| 1c | Did the foundation file <b>Form 1120-POL</b> for this year? .....   |     | X   |
|    | d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:<br>(1) On the foundation. \$ <u>0.</u> (2) On foundation managers. \$ <u>0.</u>  |     |     |
|    | e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ <u>0.</u>  |     |     |
| 2  | Has the foundation engaged in any activities that have not previously been reported to the IRS? .....   |     | X   |
|    | If "Yes," attach a detailed description of the activities.  |     |     |
| 3  | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .....  |     | X   |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? .....   |     | X   |
| 4b | If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? .....   |     | N/A |
| 5  | Was there a liquidation, termination, dissolution, or substantial contraction during the year? .....  |     | X   |
|    | If "Yes," attach the statement required by <i>General Instruction T</i> .   |     |     |
| 6  | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:<br>• By language in the governing instrument, or<br>• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? .....            | X   |     |
| 7  | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV .....  | X   |     |
| 8a | Enter the states to which the foundation reports or with which it is registered. See instructions. _____<br><u>IN</u>   |     |     |
| 8b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation .....   | X   |     |
| 9  | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2022 or the tax year beginning in 2022? See the instructions for Part XIII. If "Yes," complete Part XIII .....   |     | X   |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses .....  |     | X   |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions .....  |     | X   |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions .....   |     | X   |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? .....   | X   |     |
|    | Website address <u>WWW.TCCGIVES.COM</u>   |     |     |
| 14 | The books are in care of <u>KRISTI BEHLER</u> Telephone no. <u>844-822-7625</u><br>Located at <u>10300 KINCAID DRIVE SUITE 203, FISHERS, IN</u> ZIP+4 <u>46037</u>  |     |     |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> - check here ..... <input type="checkbox"/><br>and enter the amount of tax-exempt interest received or accrued during the year .....   15   <u>N/A</u>  |     |     |
| 16 | At any time during calendar year 2022, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? .....   |     | X   |
|    | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country  |     |     |

**Part VI-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.

|  | Yes   | No  |
|--|-------|-----|
| <b>1a</b> During the year, did the foundation (either directly or indirectly):   |       |     |
| (1) Engage in the sale or exchange, or leasing of property with a disqualified person? .....   | 1a(1) | X   |
| (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? .....   | 1a(2) | X   |
| (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? .....   | 1a(3) | X   |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? .....   | 1a(4) | X   |
| (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? .....  | 1a(5) | X   |
| (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) .....  | 1a(6) | X   |
| <b>b</b> If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .....  | 1b    | X   |
| <b>c</b> Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>  |       |     |
| <b>d</b> Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2022? .....   | 1d    | X   |
| <b>2</b> Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):  |       |     |
| <b>a</b> At the end of tax year 2022, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2022? .....  | 2a    | X   |
| If "Yes," list the years _____, _____, _____, _____  |       |     |
| <b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement - see instructions.) .....   | 2b    | N/A |
| <b>c</b> If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. _____, _____, _____, _____  |       |     |
| <b>3a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? .....   | 3a    | X   |
| <b>b</b> If "Yes," did it have excess business holdings in 2022 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2022.) ..... | 3b    | N/A |
| <b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? .....  | 4a    | X   |
| <b>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2022? .....   | 4b    | X   |

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**Part VI-B** Statements Regarding Activities for Which Form 4720 May Be Required (continued)

|  | Yes | No |
|--|-----|----|
| <b>5a</b> 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))?  |     | X  |
| (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?  |     | X  |
| (3) Provide a grant to an individual for travel, study, or other similar purposes?   |     | X  |
| (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions  | X   |    |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  |     | X  |
| <b>b</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 | X   |    |
| <b>c</b> Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>  |     |    |
| <b>d</b> 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? <b>SEE STATEMENT 6</b>                                     | X   |    |
| If "Yes," attach the statement required by Regulations section 53.4945-5(d).   |     |    |
| <b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  |     | X  |
| <b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.  |     | X  |
| <b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?   |     | X  |
| <b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? <b>N/A</b>  |     |    |
| <b>8</b> 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?  |     | X  |

**Part VII** 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<br>10300 KINCAID DRIVE SUITE 203<br>FISHERS, IN 46037 | BOARD CHAIRMAN<br>1.00                                    | 0.  | 0.  | 0.                                    |
| JULIE MOOREHEAD<br>10300 KINCAID DRIVE SUITE 203<br>FISHERS, IN 46037 | BOARD MEMBER & EXECUTIVE DIRECTOR<br>5.00                 | 0.  | 0.  | 0.                                    |
| CHAD JENSEN<br>10300 KINCAID DRIVE SUITE 203<br>FISHERS, IN 46037     | BOARD MEMBER<br>1.00                                      | 0.  | 0.  | 0.                                    |
| KATIE WILEY<br>10300 KINCAID DRIVE SUITE 203<br>FISHERS, IN 46037     | BOARD MEMBER<br>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 VII** 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 VIII-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 VIII-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 IX 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 | 1,869,828. |
| c   | Fair market value of all other assets (see instructions) .....  | 1c |            |
| d   | <b>Total</b> (add lines 1a, b, and c) .....   | 1d | 1,869,828. |
| 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  | 1,869,828. |
| 4   | Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions) ..... | 4  | 28,047.    |
| 5   | <b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 .....                                       | 5  | 1,841,781. |
| 6   | <b>Minimum investment return.</b> Enter 5% (0.05) of line 5 .....   | 6  | 92,089.    |

**Part X 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 IX, line 6 .....   | 1  | 92,089. |
| 2a | Tax on investment income for 2022 from Part V, line 5 .....  | 2a |         |
| b  | Income tax for 2022. (This does not include the tax from Part V.) .....  | 2b |         |
| c  | Add lines 2a and 2b .....  | 2c | 0.      |
| 3  | Distributable amount before adjustments. Subtract line 2c from line 1 .....                                    | 3  | 92,089. |
| 4  | Recoveries of amounts treated as qualifying distributions .....  | 4  | 0.      |
| 5  | Add lines 3 and 4 .....  | 5  | 92,089. |
| 6  | Deduction from distributable amount (see instructions) .....   | 6  | 0.      |
| 7  | <b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1 ..... | 7  | 92,089. |

**Part XI 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 | 1,635,908. |
| b  | Program-related investments - total from Part VIII-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  | <b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part XII, line 4 .....              | 4  | 1,635,908. |

Form 990-PF (2022)

**Part XII** Undistributed Income (see instructions)

|  | (a)<br>Corpus | (b)<br>Years prior to 2021 | (c)<br>2021 | (d)<br>2022 |
|--|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2022 from Part X, line 7  |               |                            |             | 92,089.     |
| 2 Undistributed income, if any, as of the end of 2022:   |               |                            |             |             |
| a Enter amount for 2021 only   |               |                            | 0.          |             |
| b Total for prior years:   |               | 0.                         |             |             |
| 3 Excess distributions carryover, if any, to 2022:   |               |                            |             |             |
| a From 2017  |               |                            |             |             |
| b From 2018  |               |                            |             |             |
| c From 2019  |               |                            |             |             |
| d From 2020  | 716,027.      |                            |             |             |
| e From 2021  | 686,084.      |                            |             |             |
| f Total of lines 3a through e  | 1,402,111.    |                            |             |             |
| 4 Qualifying distributions for 2022 from Part XI, line 4: \$ 1,635,908.  |               |                            |             |             |
| a Applied to 2021, 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 2022 distributable amount   |               |                            |             | 92,089.     |
| e Remaining amount distributed out of corpus   | 1,543,819.    |                            |             |             |
| 5 Excess distributions carryover applied to 2022 (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:   | 2,945,930.    |                            |             |             |
| a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5  |               |                            |             |             |
| 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 2021. Subtract line 4a from line 2a. Taxable amount - see instr.  |               |                            | 0.          |             |
| f Undistributed income for 2022. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2023  |               |                            |             | 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 2017 not applied on line 5 or line 7   | 0.            |                            |             |             |
| 9 Excess distributions carryover to 2023. Subtract lines 7 and 8 from line 6a  | 2,945,930.    |                            |             |             |
| 10 Analysis of line 9:   |               |                            |             |             |
| a Excess from 2018   |               |                            |             |             |
| b Excess from 2019   |               |                            |             |             |
| c Excess from 2020   | 716,027.      |                            |             |             |
| d Excess from 2021   | 686,084.      |                            |             |             |
| e Excess from 2022   | 1,543,819.    |                            |             |             |

Part XIII Private Operating Foundations (see instructions and Part VI-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 2022, 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) 2022, (b) 2021, (c) 2020, (d) 2019, (e) Total. Rows include 2a-e (Qualifying distributions) and 3a-d (Alternative tests).

Part XIV 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 8

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

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 XIV** Supplementary Information *(continued)*

| <b>3 Grants and Contributions Paid During the Year or Approved for Future Payment</b>           |  |                                      |  |                      |
|---|--|--------------------------------------|--|----------------------|
| Recipient<br>Name and address (home or business)  | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution<br>**  | Amount               |
| <b>a Paid during the year</b>   |  |                                      |  |                      |
| 100 BLACK MEN OF SOUTH METROPOLITAN<br>1513 E CLEVELAND AVE SUITE 101-A<br>EAST POINT, GA 30344 | N/A  | PC                                   | GENERAL PROGRAM<br>SUPPORT   | 2,000.               |
| 22 HEARTBEATS<br>5716 N. 167TH AVE. CIR.<br>OMAHA, NE 68116                                     | N/A  | PC                                   | CONSTRUCTION OF A<br>HOMELESS VETERAN<br>TRANSITIONAL HOUSING<br>PROJECT         | 2,000.               |
| 33 JORDYNSTRONG FOUNDATION<br>4786 DRESSLER ROAD NW, #134<br>CANTON, OH 44718                   | N/A  | PC                                   | PURCHASE HEADPHONES<br>FOR YOUTH WITH A<br>CANCER DIAGNOSIS FOR<br>MUSIC THERAPY | 10,000.              |
| 911 GIVES HOPE<br>PO BOX 3644<br>EVANSVILLE, IN 47735   | N/A  | PC                                   | CREATE A RELIEF FUND<br>FOR FIRST RESPONDERS                                     | 2,000.               |
| AGAPE PROJECT OF GEORGIA INC<br>PO BOX 1129<br>GAINESVILLE, GA 30503                            | N/A  | PC                                   | GENERAL SUPPORT  | 2,000.               |
| <b>Total</b>  |  |                                      | <b>SEE CONTINUATION SHEET(S)</b>   | <b>3a</b> 1,635,908. |
| <b>b Approved for future payment</b>  |  |                                      |  |                      |
| NONE  |  |                                      |  |                      |
| <b>Total</b>  |  |                                      | <b>3b</b>  | 0.                   |



**Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations**

|          |  | Yes | No |
|----------|--|-----|----|
| <b>1</b> | Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?  |     |    |
| <b>a</b> | Transfers from the reporting foundation to a noncharitable exempt organization of:   |     |    |
|          | (1) Cash .....   | X   |    |
|          | (2) Other assets .....   |     | X  |
| <b>b</b> | Other transactions:  |     |    |
|          | (1) Sales of assets to a noncharitable exempt organization .....   |     | X  |
|          | (2) Purchases of assets from a noncharitable exempt organization .....   |     | X  |
|          | (3) Rental of facilities, equipment, or other assets .....   |     | X  |
|          | (4) Reimbursement arrangements .....   |     | X  |
|          | (5) Loans or loan guarantees .....   |     | X  |
|          | (6) Performance of services or membership or fundraising solicitations .....   |     | X  |
| <b>c</b> | Sharing of facilities, equipment, mailing lists, other assets, or paid employees .....   |     | X  |
| <b>d</b> | If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. |     |    |

| (a) Line no. | (b) Amount involved | (c) Name of noncharitable exempt organization | (d) Description of transfers, transactions, and sharing arrangements |
|--------------|---------------------|---|--|
|              |                     | OKEECHOBEE FRATERNAL ORDER                    | SEE STATEMENT 9  |
|              |                     | OF POLICE ASSOCIATES, LODGE                   |  |
| A1           | 2,000.              | 69, INC.                                      |  |
| A1           | 2,000.              | VETERANS OF FOREIGN WARS                      |  |
| A1           | 2,000.              | MAC A CHEEK LEARNING CENTER                   |  |
|              |                     | THE ALL THINGS APPLE                          |  |
| A1           | 2,000.              | FOUNDATION                                    |  |
| A1           | 5,000.              | VILLAGE OF SANDOVAL                           |  |
| A1           | 10,000.             | RALLY 2 GIVE                                  |  |
| A1           | 2,500.              | DOUGLAS PARK PROJECT                          |  |

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?  Yes  No

**b** If "Yes," complete the following schedule.

| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
|--------------------------|--------------------------|---------------------------------|
| N/A                      |                          |                                 |

**Sign Here** Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer or trustee: \_\_\_\_\_ Date: \_\_\_\_\_ Title: **EXECUTIVE DIRECTOR**

May the IRS discuss this return with the preparer shown below? See instr.  Yes  No

|                               |                            |  |          |   |                |
|-------------------------------|----------------------------|--|----------|---|----------------|
| <b>Paid Preparer Use Only</b> | Print/Type preparer's name | Preparer's signature                   | Date     | Check <input type="checkbox"/> if self-employed | PTIN           |
|                               | CASSE TATE                 | CASSE TATE                             | 11/09/23 |   | P01271193      |
|                               | Firm's name                | KSM BUSINESS SERVICES, INC             |          | Firm's EIN                                      | 35-2123203     |
|                               | Firm's address             | PO BOX 40857<br>INDIANAPOLIS, IN 46240 |          | Phone no.                                       | (317) 580-2000 |

**Part XIV** Supplementary Information

**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient<br>Name and address (home or business)   | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution  | Amount            |
|--|--|--------------------------------------|--|-------------------|
| AHM YOUTH AND FAMILY SERVICES, INC.<br>25 PENDLETON DRIVE<br>HEBRON, CT 06248                          | N/A  | PC                                   | SUPPORT OF A MENTORING PROGRAM, INCLUDING READING MATERIALS, TRANSPORTATION, FIELD TRIPS, ETC. | 3,800.            |
| AHM YOUTH AND FAMILY SERVICES, INC.<br>25 PENDLETON DRIVE<br>HEBRON, CT 06248                          | N/A  | PC                                   | PURCHASE AND INSTALL SECURITY CAMERAS AND OTHER EQUIPMENT TO SUPPORT SAFETY                    | 3,000.            |
| AHM YOUTH AND FAMILY SERVICES, INC.<br>25 PENDLETON DRIVE<br>HEBRON, CT 06248                          | N/A  | PC                                   | PURCHASE A PROGRAM AND EVENT MANAGEMENT SYSTEM   | 3,000.            |
| AIRPORT COMMUNITY SCHOOLS FOUNDATION<br>11200 GRAFTON RD.<br>CARLETON, MI 48117                        | N/A  | PC                                   | SUPPORT OF A MENTORING PROGRAM FOR GIRLS   | 5,000.            |
| ALLEGHENY SPAY AND NEUTER CLINIC<br>P.O. BOX 97<br>WOODLAND, PA 16881                                  | N/A  | PC                                   | EXPAND EXAM ROOM AND ANIMAL TRANSPORT NEEDS  | 3,000.            |
| ALWAYS HOME, INC.<br>119 HIGH STREET<br>MYSTIC, CT 06355   | N/A  | PC                                   | SECURITY DEPOSITS AND RENT FOR HOMELESS  | 10,000.           |
| AMERICAN LEGION ADAMS POST 43<br>(CEMETERY RESTORATION'S)<br>PO BOX 901<br>DECATUR, IN 46733           | N/A  | NC                                   | RESTORATION OF VETERAN HEADSTONES IN A LOCAL CEMETARY  | 2,000.            |
| ANCHOR HOUSE, INC.<br>250 S. VINE ST., PO BOX 765<br>SEYMOUR, IN 47274                                 | N/A  | PC                                   | PURCHASE FOOD AND OTHER ITEMS NEEDED FOR FOOD PANTRY   | 2,000.            |
| ANDOVER, HEBRON, MARLBOROUGH YOUTH AND FAMILY SERVICES, INC.<br>25 PENDLETON DRIVE<br>HEBRON, CT 06248 | N/A  | PC                                   | PRE-SCHOOL EDUCATIONAL PROGRAMS, ENVIRONMENTAL EDUCATION, SPORTS, AND MUSIC PROGRAMS           | 8,750.            |
| ANGELS IN MOTION<br>903 WALNUT AVE.<br>NORTHFIELD, NJ 08205  | N/A  | PC                                   | PROVIDE TRANSPORTATION TO REHAB  | 2,000.            |
| <b>Total from continuation sheets</b>  |  |                                      |  | <b>1,617,908.</b> |

**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient<br>Name and address (home or business)                            | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution  | Amount  |
|---|--|--------------------------------------|--|---------|
| ANNIE'S ANGELS MEMORIAL FUND INC.<br>8 JANA LANE<br>STRATHAM, NH 03885      | N/A  | PC                                   | CREATE A PROFESSIONAL<br>VIDEO OF DRUM CLASSES<br>FOR PARKINSON'S<br>PATIENTS TO LEARN                   | 10,000. |
| ARF (ANIMAL RIGHTS-FUREVER)<br>PO BOX 264<br>RIPLEY, WV 25271               | N/A  | PC                                   | SUPPORT OF MAINTENANCE<br>AND FUEL FOR ANIMAL<br>TRANSPORT VAN   | 2,000.  |
| AUTISM SPEAKS<br>1060 STATE ROAD, SECOND FLOOR<br>PRINCETON, NJ 08540       | N/A  | PC                                   | GENERAL PROGRAM<br>SUPPORT   | 20,000. |
| AUTISMUP, INC.<br>50 SCIENCE PKWY.<br>ROCHESTER, NY 14620                   | N/A  | PC                                   | INCREASE SAFETY FOR<br>STAFF THROUGH THE<br>PURCHASE OF 2 MOBILE<br>PHONES AND SERVICE FOR<br>36 MONTHS  | 4,000.  |
| AVENUE 7 INC<br>3770 MORAIN ST., APT. 108<br>MEMPHIS, TN 38125              | N/A  | PC                                   | FUND AN EVENT WHICH<br>WILL RAISE MONEY FOR A<br>NEW BUILDING OR<br>SCHOLARSHIPS                         | 5,000.  |
| BATTLE BORNE<br>PO BOX 366<br>CENTER VALLEY, PA 18034                       | N/A  | PC                                   | PURCHASE AND MARKETING<br>OF A COMPANY VAN, GAS<br>AND INSURANCE TO<br>TRANSPORT VETERANS                | 3,000.  |
| BECOME<br>2719 SOUTH WEBSTER, #6176<br>KOKOMO, IN 46902                     | N/A  | PC                                   | SUPPORT OF AN EVENT<br>FOR A PERSONAL GROWTH<br>AND DEVELOPMENT<br>ACADEMY                               | 5,000.  |
| BEN'S RANCH FOUNDATION<br>PO BOX 3952<br>CARMEL, IN 46082                   | N/A  | PC                                   | SUPPORT OUTREACH AND<br>RECRUITING OF PARTNERS<br>AND MENTAL HEALTH<br>PROFESSIONALS                     | 2,000.  |
| BERKSHIRE HELPING HANDS, INC.<br>12 BEECHER STREET<br>ADAMS, MA 01220       | N/A  | PC                                   | FOOD, TOILETRIES,<br>SUPPLEMENTAL EMERGENCY<br>HEAT OR UTILITIES AND<br>ASSISTANCE WITH<br>GETTING BASIC | 1,000.  |
| BEST BUDDIES<br>8604 ALLISONVILLE ROAD, SUITE 165<br>INDIANAPOLIS, IN 46250 | N/A  | PC                                   | GENERAL PROGRAM<br>SUPPORT   | 10,000. |
| <b>Total from continuation sheets</b>                                       |  |                                      |  |         |

**Part XIV** Supplementary Information

**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient<br>Name and address (home or business)  | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution  | Amount  |
|---|--|--------------------------------------|--|---------|
| BIG BIG TABLE COMMUNITY CAFE<br>272 HUDSON STREET<br>BUFFALO, NY 14201                            | N/A  | PC                                   | SUPPORT OF PRINTING<br>AND MEAL NEEDS  | 2,500.  |
| BIG BROTHER BIG SISTER OF RHODE<br>ISLAND<br>188 VALLEY STREET, SUITE 125<br>PROVIDENCE, RI 02903 | N/A  | PC                                   | PROGRAM COSTS<br>INCLUDING BACKGROUND<br>CHECKS AND TRAINING<br>FOR NEWLY ENROLLED<br>ADULT MENTORS            | 2,000.  |
| BIG BROTHERS BIG SISTERS OF CENTRAL<br>INDIANA<br>1433 N. MERIDIAN ST.<br>INDIANAPOLIS , IN 46202 | N/A  | PC                                   | SUPPORT OF ACTIVITIES<br>ASSOCIATED WITH A<br>COLLEGE READINESS<br>PROGRAM                                     | 2,000.  |
| BIGJAWS YOUTH FOR CHRIST<br>PO BOX 431<br>BLUFFTON, IN 46714                                      | N/A  | PC                                   | SUPPORT OF<br>MISCELLANEOUS NEEDS AT<br>AN AFTER SCHOOL<br>PROGRAM   | 2,000.  |
| BIRMINGHAM YMCA<br>5920 VALLEY RD<br>TRUSSVILLE, AL 35173   | N/A  | PC                                   | BUY ART & OTHER<br>SUPPLIES FOR PROJECTS<br>DURING THE SCHOOL YEAR<br>FOR THE YMCA AFTER<br>SCHOOL             | 2,000.  |
| BLB VETERANS CHARITY LTD<br>2064 CONLIN AVE.<br>EVANSVILLE, IN 47714                              | N/A  | PC                                   | SUPPORT OF RENT,<br>UTILITIES, EVENT<br>NEEDS, ADVERTISING AND<br>SUPPLIES                                     | 2,000.  |
| BLESSINGS IN A BACKPACK<br>PO BOX 28<br>EFFINGHAM, IL 62401                                       | N/A  | PC                                   | PURCHASE FOOD FOR<br>CHILDREN TO EAT OVER<br>THE WEEKEND   | 10,000. |
| BLESSINGS IN A BACKPACK<br>PO BOX 950291<br>LOUISVILLE, KY 40295                                  | N/A  | PC                                   | PROVIDE FOOD FOR<br>CHILDREN IN THE<br>COMMUNITY AFTER SCHOOL<br>AND ON WEEKENDS                               | 2,000.  |
| BOYS FARM INC.<br>6655 HWY 34/121<br>NEWBERRY, SC 29108   | N/A  | PC                                   | EDUCATIONAL FIELD<br>TRIPS, INCENTIVES &<br>ACADEMIC SUCCESS<br>REWARDS TO ENCOURAGE<br>STUDENTS TO SUCCEED IN | 2,000.  |
| BRAYBOY SAFETY AGAINST DOMESTIC<br>VIOLENCE CRISIS CENTER<br>P.O. BOX 753<br>MARIANNA , AR 72360  | N/A  | PC                                   | PROVIDE FUNDS FOR<br>EMERGENCY HOTEL STAYS   | 2,000.  |
| <b>Total from continuation sheets</b> .....   |  |                                      |  |         |

**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient<br>Name and address (home or business)   | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution  | Amount  |
|--|--|--------------------------------------|--|---------|
| BRIDGEPORT ANIMAL RESCUE CREW INC.<br>857 POST RD. #235<br>FAIRFIELD , CT 06824                    | N/A  | PC                                   | PAY FOR VITAL<br>EMERGENCY MEDICAL CARE<br>FOR ANIMALS   | 10,000. |
| BRIDGEPORT ANIMAL RESCUE CREW INC.<br>857 POST RD.<br>FAIRFIELD, CT 06824                          | N/A  | PC                                   | SUPPORT OF MEDICAL<br>NEEDS OF RESCUE<br>ANIMALS   | 2,500.  |
| BUCKING FOR HOPE<br>4020 NW RIMROCK ACRES LOOP<br>PRINEVILLE, OR 97754                             | N/A  | PC                                   | HELP VETERANS WITH<br>HOUSING NEEDS  | 2,000.  |
| CAMP QUALITY NWMO<br>1325 VILLAGE DR<br>STEWARTSVILLE, MO 64490                                    | N/A  | PC                                   | SUPPLIES FOR A GIANT<br>BIRTHDAY PARTY AT A<br>SUMMER CAMP   | 5,000.  |
| CAMP REHOBOTH COMMUNITY CENTER INC<br>37 BALTIMORE AVE.<br>REHOBOTH BEACH , DE 19971               | N/A  | PC                                   | REMODEL AND UPGRADE<br>SPACE USED FOR HIV<br>TESTING   | 10,000. |
| CANCER RESOURCE CENTER OF THE HUDSON<br>VALLEY<br>100 WARD STREET, SUITE A<br>MONTGOMERY, NY 12549 | N/A  | PC                                   | PROVIDE FINANCIAL<br>SUPPORT TO FAMILIES<br>STRUGGLING WITH A<br>CANCER DIAGNOSIS                    | 2,500.  |
| CANCER SERVICES OF GRANT COUNTY<br>305 S. NORTON AVE.<br>MARION , IN 46952                         | N/A  | PC                                   | FUNDING FOR FREE<br>MAMMOGRAMS AND ANY<br>FURTHER DIAGNOSTIC<br>TESTS NEEDED                         | 2,000.  |
| CARDINAL GLENNON CHILDREN'S<br>FOUNDATION<br>3800 PARK AVENUE<br>ST. LOUIS, MO 63110               | N/A  | PC                                   | PROVIDE NEW,<br>DEVELOPMENTALLY<br>APPRIPRIATE BOOKS FOR<br>CHILDREN                                 | 2,000.  |
| CARING CLOTHING CO-OP INC<br>6019 N 750 E<br>NEW CARLISLE, IN 46552                                | N/A  | PC                                   | SUPPORT OF VARIOUS<br>FINANCIAL ASSISTANCE<br>NEEDS  | 2,500.  |
| CARING UNLIMITED CORP<br>PO BOX 590<br>SANFORD, ME 04073   | N/A  | PC                                   | SUPPORT OF TECHNOLOGY<br>COMMUNICATION<br>EQUIPMENT, PROGAM<br>MATERIALS AND PROPERTY<br>MAINTENANCE | 2,500.  |
| <b>Total from continuation sheets</b>  |  |                                      |  |         |

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| CAROLINE COUNTY FAMILY YMCA<br>46 DENTON PLAZA<br>DENTON, MD 21629   | N/A  | PC                                   | FUNDING FOR FINANCIAL<br>AID/SCHOLARSHIPS FOR<br>THE PROGRAMS AND<br>SERVICES AT A YMCA                      | 2,000. |
| CASA OF JEFFERSON COUNTY<br>319 W. 2ND STREET<br>MADISON, IN 47250   | N/A  | PC                                   | RECRUIT NEW VOLUNTEERS<br>THROUGH MARKETING AND<br>ADVERTISING   | 2,500. |
| CASA OF WASHINGTON COUNTY, INC. ;<br>CASA CARES<br>801 JACKSON ST. #141<br>SALEM, IN 47170                 | N/A  | PC                                   | PURCHASE BACKPACKS AND<br>OTHER SUPPLIES FOR<br>CHILDREN BEING REMOVED<br>FROM THEIR HOME                    | 3,000. |
| CASA; CITIZENS AGAINST SPOUSE ABUSE<br>INC.<br>3785 TRAVIS DR,<br>SEDALIA, MO 65301                        | N/A  | PC                                   | CREATE A SPACE FOR<br>CHILDREN AND FAMILIES<br>AT A DOMESTIC VIOLENCE<br>TEMPORARY SHELTER                   | 2,500. |
| CATS HAVEN, LTD<br>2603 N. COLLEGE AVE.<br>INDIANAPOLIS, IN, IN 46205                                      | N/A  | PC                                   | PURCHASE AND<br>INSTALLATION OF 2 SETS<br>OF WASHER/DRYERS AND<br>PLUMBING REPLACEMENT<br>IN A CAT SANCTUARY | 8,100. |
| CENTER OF HOPE FRIENDSHIP ROOM<br>419 LOGAN ST.<br>STEUBENVILLE, OH 43952                                  | N/A  | PC                                   | PURCHASE ITEMS NEEDED<br>FOR A SMALL BUSINESS<br>TO ENABLE WOMEN TO<br>LEARN LIFE AND JOB<br>SKILLS          | 5,000. |
| CENTRAL OREGON ANIMAL FRIENDS DBA<br>HOME AT LAST HUMANE SOCIETY<br>200 RIVER ROAD<br>THE DALLES, OR 97058 | N/A  | PC                                   | PROVIDE SPAY/NEUTER<br>SERVICES FOR ANIMALS,<br>AS WELL AS REDUCED<br>COST FOR OTHERS IN THE<br>COMMUNITY    | 2,000. |
| CHANGE A LIFE DOG RESCUE<br>9 RIDGE RD<br>EAST HADDAM, CT 06423  | N/A  | PC                                   | COVER THE NEUTER/SPAY<br>AT A CT LOW COST<br>NEUTER/SPAY CLINIC, AS<br>WELL AS OTHER MEDICAL<br>EXPENSES     | 3,300. |
| CHANGE A LIFE DOG RESCUE<br>9 RIDGE RD.<br>EAST HADDAM, CT 06423   | N/A  | PC                                   | TRANSPORTATION AND<br>MEDICAL COSTS TO<br>SUPPORT 2 LITTERS OF<br>PUPPIES                                    | 3,025. |
| CHARITABLE ALLIES, INC<br>5100 PURDUE RD., SUITE 115<br>INDIANAPOLIS, IN 46268                             | N/A  | PC                                   | FUNDING FOR PHONE,<br>TELECONFERENCE &<br>IN-PERSON LEGAL<br>CONSULTATIONS BY<br>ATTORNEYS FOR OTHER         | 5,000. |
| <b>Total from continuation sheets</b>  |  |                                      |  |        |

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|---|--|--------------------------------------|---|---------|
| CHARITY'S HOME<br>4805 NELSON AVENUE<br>BALTIMORE, MD 21215   | N/A  | PC                                   | GENERAL PROGRAM<br>SUPPORT  | 25,000. |
| CHARLIE'S CHAMPIONS CHILDHOOD CANCER<br>FOUNDATION<br>179 PINNACLE DRIVE<br>HIGH POINT, NC 27265                        | N/A  | PC                                   | FUNDING FOR CANCER<br>CARE PACKAGES & PAY<br>FOR EXPENSES LIKE GAS,<br>PARKING, UTILITIES,<br>LIVING EXPENSES, ETC. | 2,000.  |
| CHESTER COMMUNITY FOOD BANK<br>131 S DUGGER AVE STE. A<br>ROBERTA, GA 31078   | N/A  | PC                                   | PURCHASE OF A BUILDING<br>TO HOUSE A FOOD BANK  | 10,000. |
| CHILD SAFE OF CENTRAL MISSOURI, INC<br>3309 W. MAIN ST.<br>SEDALIA, MO 65301  | N/A  | PC                                   | PROVIDE CHILDREN IN<br>1ST THROUGH SIXTH<br>GRADE WITH A FREE<br>BASKETBALL CLINIC                                  | 2,000.  |
| CHILD SAFE OF CENTRAL MISSOURI, INC.<br>3309 W MAIN ST<br>SEDALIA, MO 65301   | N/A  | PC                                   | SUPPORT OF PREVENTION<br>MATERIALS DISTRIBUTED<br>TO CHILDREN DURING<br>CHILD ABUSE AWARENESS<br>MONTH              | 1,000.  |
| CHILDREN'S TUMOR FOUNDATION<br>MAIL CODE: 6895, PO BOX 7247<br>PHILADELPHIA, PA 19170                                   | N/A  | PC                                   | GENERAL PROGRAM<br>SUPPORT  | 20,000. |
| CHILDREN'S WISCONSIN FOUNDATION<br>M.S. 3050, PO BOX 1997<br>MILWAUKEE, WI 53201  | N/A  | PC                                   | DIRECTLY PROVIDE 666<br>CHILDREN WITH \$15 GIFT<br>CARDS FOR CHILDREN'S<br>CAFETERIA OR CAFES                       | 2,000.  |
| CHRISTIAN NEIGHBORHOOD CENTER OF<br>NORWICH, INC. DBA THE PLACE<br>22 EAST MAIN STREET, PO BOX 509<br>NORWICH, NY 13815 | N/A  | PC                                   | PROVIDE 20 TEENS WITH<br>THE RED CROSS<br>BABYSITTER TRAINING   | 1,000.  |
| CIRCLE U HELP CENTER<br>19 NORTH 13TH STREET<br>RICHMOND, IN 47374  | N/A  | PC                                   | PURCHASE AND MAINTAIN<br>INVENTORY FOR A FOOD<br>INSECURITY PROGRAM FOR<br>YOUTH                                    | 2,000.  |
| CITIZENS AGAINST SPOUSE ABUSE (CASA)<br>PO BOX 1371<br>SEDALIA, MO 65302-1371   | N/A  | PC                                   | REPLACE FLOORING AND<br>CARPET IN DOMESTIC<br>VIOLENCE SHELTER  | 3,000.  |
| <b>Total from continuation sheets</b>   |  |                                      |   |         |

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| CITIZENS AGAINST SPOUSE ABUSE (CASA)<br>PO BOX 1371<br>SEDALIA, MO 65302-1371                           | N/A  | PC                                   | REPLACE CARPETING WITH<br>HARD WOOD FLOORS IN<br>SHELTER  | 2,000. |
| CLEMSON CHILD DEVELOPMENT CENTER INC<br>216 BUTLER STREET<br>CLEMSON, SC 29631                          | N/A  | PC                                   | TUITION SCHOLARSHIPS<br>FOR FAMILIES IN NEED  | 3,500. |
| CLOTHING OUR KIDS<br>26582 JOHN J. WILLIAMS HIGHWAY, SUITE<br>2 MILLSBORO, DE 19966                     | N/A  | PC                                   | BUY NEW CLOTHING FOR<br>CHILDREN WHO COME TO<br>SCHOOL OR OTHER<br>ACTIVITIES                             | 5,000. |
| COBURN PLACE<br>604 E 38TH ST.<br>INDIANAPOLIS, IN 46205  | N/A  | PC                                   | REPAIRS TO CHILDREN'S<br>OUTDOOR SPACE &<br>PURCHASE GAS CARDS FOR<br>SURVIVORS AT A<br>DOMESTIC VIOLENCE | 2,500. |
| COCKTAILS & CAREGIVERS<br>PO BOX 866<br>WESTFIELD, IN 46074   | N/A  | PC                                   | SUPPORT ONE MONTH OF<br>CHILD CARE<br>NEEDS/SUBSIDIZE CARE<br>FOR THE HOME FOR<br>FAMILIES GOING THROUGH  | 5,000. |
| COLLINSVILLE FAITH IN ACTION<br>233 N. SEMINARY ST.<br>COLLINSVILLE, IL 62234                           | N/A  | PC                                   | SUPPORT OF SEVERAL<br>PROGRAMS FOR ELDERLY<br>OR DISABLED COMMUNITY<br>MEMBERS                            | 2,000. |
| COLONIAL NEWFOUNDLAND RESCUE INC.<br>492 VIEWTOWN ROAD<br>AMISSVILLE, VA 20106                          | N/A  | PC                                   | EQUIP VEHICLES WITH<br>SAFETY CAGES FOR<br>TRANSPORTING DOGS  | 1,000. |
| COMMUNITY ANIMAL RESCUE AND<br>EDUCATION, ST. FRANCIS<br>6228 COUNTRY CLUB RD.<br>MURPHYSBORO, IL 62966 | N/A  | PC                                   | PURCHASE FENCING FOR<br>PLAY YARDS FOR ANIMALS<br>IN A RESCUE   | 8,000. |
| COMMUNITY FOOD BANK OF NJ<br>31 EVANS TERMINAL<br>HILLSIDE, NJ 07205                                    | N/A  | PC                                   | SUPPORT OF KITCHEN AND<br>FOOD NEEDS  | 2,000. |
| COMMUNITY HEALING CENTERS<br>2615 STADIUM DRIVE<br>KALAMAZOO, MI 49008                                  | N/A  | PC                                   | GENERAL SUPPORT OF<br>PROGRAM NEEDS SUCH AS<br>RENT, TRANSPORTATION<br>AND MARKETING                      | 2,500. |
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| COMMUNITY MEDIA OF SOUTH CENTRAL PA<br>128 N. PETERS STREET<br>NEW OXFORD, PA 17350                                   | N/A  | PC                                   | CREATE VIDEO CONTENT<br>TO PROMOTE DIVERSITY &<br>SERVICE LEADING UP TO<br>PROGRAMING ON MARTIN<br>LUTHER KING DAY | 4,500.  |
| COMMUNITY SERVICE CENTER OF MORGAN<br>COUNTY INC. DBA WELLSRING<br>301 WEST HARRISON STREET<br>MARTINSVILLE, IN 46151 | N/A  | PC                                   | EXPANSION OF A<br>TRAINING SPACE USED<br>FOR COMMUNITY MEETINGS  | 5,000.  |
| COMPASSION CONNECTION<br>1031 W. COUNTY HIGHWAY B<br>SHELL LAKE, WI 54871   | N/A  | PC                                   | REMODEL A MEN'S<br>BATHROOM IN AN<br>ADDICTION CENTER  | 2,500.  |
| COVERED BRIDGE GATEWAY TRAILS<br>ASSOCIATION INC.<br>PO BOX NO. 3<br>ROCKVILLE, IN 47872                              | N/A  | PC                                   | BUILD A FREE,<br>ACCESSIBLE COMMUNITY<br>TRAIL   | 10,000. |
| CRADLES TO CRAYONS<br>PO BOX 411310<br>BOSTON, MA 02241   | N/A  | PC                                   | PURCHASING WINTER<br>COATS FOR DISTRIBUTION<br>TO MA CHILDREN IN NEED  | 2,500.  |
| CRISIS SERVICES OF NORTH ALABAMA,<br>INC.<br>P.O. BOX 368<br>HUNTSVILLE, AL 35804                                     | N/A  | PC                                   | PAVE, REPAIR & EXPAND<br>THE PARKING AREA<br>LEADING TO 2 DOMESTIC<br>VIOLENCE SHELTER<br>ENTRANCES                | 10,000. |
| CROSSROADS FOR KIDS (DBA CROSSROADS)<br>119 MYRTLE STREET<br>DUXBURY, MA 02332  | N/A  | PC                                   | PURCHASE 12 NEW<br>BICYCLES FOR A SUMMER<br>CAMP   | 2,000.  |
| CURE JM FOUNDATION<br>19309 WINMEADE DRIVE SUITE 204<br>LEESBURG, VA 20176  | N/A  | PC                                   | SUPPORT A CRITICAL<br>CARE NETWORK AT RILEY<br>CHILDREN'S HOSPITAL<br>FOR JUVENILE MYOSITIS                        | 10,000. |
| DELANCO TOWNSHIP SCHOOL DISTRICT<br>1301 BURLINGTON AVENUE<br>DELANCO, NJ 08075                                       | N/A  | GOV                                  | SUPPORT OF AFTERSCHOOL<br>PROGRAMS WHICH HAVE<br>BEEN DEFUNDED   | 10,000. |
| DIAKONIA, INC.<br>12747 OLD BRIDGE RD.<br>OCEAN CITY, MD 21842  | N/A  | PC                                   | REPAIR OF EMERGENCY<br>SHELTER TO OPEN FAMILY<br>UNITS   | 7,300.  |
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| DIRIGO READS<br>150 STATE STREET<br>BANGOR, ME 04401   | N/A  | PC                                   | PURCHASE BOOKS FOR<br>FIRST GRADE STUDENTS   | 2,500. |
| DISCOVERY RIDERS INC.<br>1797 ST. RT. 47 EAST<br>BELLEFONTAINE, OH 43311                         | N/A  | PC                                   | PROVIDE SCHOLARSHIPS<br>FOR RIDING LESSONS   | 2,000. |
| DISTRICT ALLIANCE FOR SAFE HOUSING<br>INC<br>PO BOX 91730<br>WASHINGTON , DC 20090               | N/A  | PC                                   | CONNECT FAMILIES<br>FLEEING VIOLENCE WITH<br>A SHORT-TERM HOTEL<br>STAY                                | 5,000. |
| DO MORE FOUNDATION<br>923 STRAFFORD ST.<br>BETHLEHEM, PA 18018                                   | N/A  | NC                                   | PURCHASE TOYS FOR<br>CHRISTMAS GIVEAWAY  | 2,500. |
| DOUGLAS PARK PROJECT<br>P.O. BOX 757<br>DOUGLAS , MI 49406                                       | N/A  | NC                                   | GENERAL PROGRAM<br>SUPPORT   | 2,500. |
| DREAM ALIVE, INC.<br>7828 EAST 88TH STREET<br>INDIANAPOLIS, IN 46256                             | N/A  | PC                                   | SUPPORT OF HBCU ROAD<br>TRIP FOR STUDENTS IN<br>HIGH SCHOOL  | 5,000. |
| DREAM CATCHERS EQUINE ASSISTED<br>PROGRAM<br>PO BOX 461, 7550 NE CROUCH RD.<br>CAMERON, MO 64429 | N/A  | PC                                   | OFFER THERAPEUTIC<br>EQUINE THERAPY TO<br>PEOPLE WHO MAY NOT BE<br>ABLE TO AFFORD IT                   | 2,000. |
| DREAM LIKE DREW<br>222 CENTRAL AVENUE<br>EGG HARBOR TWP., NJ 08234                               | N/A  | PC                                   | COVER THE COSTS OF<br>SERVICES OR EQUIPMENT<br>THAT INSURANCE WILL<br>NOT COVER                        | 2,000. |
| DRESS FOR SUCCESS PHOENIX<br>1024 E. BUCKEYE ROAD #165<br>PHOENIX, AZ 85034                      | N/A  | PC                                   | SUPPORT OF<br>SCHOLARSHIPS TO LOW<br>INCOME, SINGLE MOTHERS<br>FOR EDUCATION, CAREER<br>AND MENTORSHIP | 5,000. |
| EASTER SEALS NEW HAMPSHIRE, INC.<br>555 AUBURN ST.<br>MANCHESTER, NH 03103                       | N/A  | PC                                   | EMERGENCY FINANCIAL<br>ASSISTANCE PROGRAM<br>SUPPORT   | 5,000. |
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| EASTHAMPTON COMMUNITY CENTER, INC.<br>12 CLARK STREET<br>EASTHAMPTON, MA 01027  | N/A   | PC                             | ENSURE THAT ALL CHILDREN HAVE ACCESS TO HEALTHY, NUTRITIOUS FOODS WHILE AT HOME                          | 2,500.  |
| EATONVILLE FAMILY AGENCY<br>PO BOX 1764<br>EATONVILLE, WA 98328   | N/A   | PC                             | PROVIDE FAMILIES WITH HOLIDAYS MEALS AND GIFTS FOR CHILDREN  | 2,500.  |
| EDELWEISS HOUSE, INC.<br>592 N COUNTY ROAD 650 E<br>GREENSBURG, IN 47240  | N/A   | PC                             | REPAIRS TO A HOME FOR FAMILIES EXPERIENCING TEMPORARY STRUGGLES  | 5,000.  |
| EDUCATE BEYOND ALL BARRIERS, INC.<br>55 S. STATE AVENUE, SUITE 3107 - P.O.<br>BOX 601 INDIANAPOLIS, IN 46206                    | N/A   | PC                             | EDUCATE AND TRAIN LOW OR NO INCOME FAMILIES  | 2,000.  |
| END 68 HOURS OF HUNGER, BARRINGTON, NH<br>PO BOX 676<br>SOMERSWORTH, NH 03878   | N/A   | PC                             | EXTEND THE MEAL SUPPORT FUND DURING THE SUMMER MONTHS  | 3,000.  |
| ENFIELD FOOD SHELF, INC.<br>786 ENFIELD STREET<br>ENFIELD, CT 06082   | N/A   | PC                             | PURCHASE AND INSTALLATION OF AN AWNING FOR OUR PANTRY ENTRANCE TO PROVIDE A SAFESPACE FOR FAMILIES       | 2,500.  |
| ENFIELD FOOD SHELF, INC.<br>786 ENFIELD STREET<br>ENFIELD, CT 06082   | N/A   | PC                             | PURCHASE EQUIPMENT NEEDED TO INCREASE AND IMPROVE THE CAPACITY AND EFFICIENCY OF FOOD ASSISTANCE PROGRAM | 10,000. |
| ENZO'S MISSION TO SPREAD HOPE FOUNDATION A.K.A ENZO'S PAJAMA DRIVE FOR HOPE<br>301 E. CAMDEN WYOMING AVENUE<br>CAMDEN, DE 19934 | N/A   | PC                             | PURCHASE NEW MATTRESSES AND PAJAMAS FOR CHILDREN   | 2,500.  |
| ESTACI (EASTERN TRAINING AND CONSULTING, INC.)<br>3100 MAIN STREET<br>EXMORE, VA 23350  | N/A   | PC                             | SUPPORT OF A SUMMER READING PROGRAM FOR BOYS THROUGH MISCELLANEOUS PURCHASE NEEDS                        | 2,000.  |
| EXETER AREA CHARITABLE FOUNDATION<br>120 WATER ST.<br>EXETER, NH 03833  | N/A   | PC                             | PROVIDE WARM WINTER CLOTHING AND BEDDING TO LOW INCOME FAMILIES  | 5,000.  |
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| FAITH AT WORK<br>42 PACIFIC AVE.<br>PLEASANTVILLE, NJ 08232  | N/A  | PC                                   | MISCELLANEOUS PROGRAM<br>PURCHASES TO SUPPORT<br>INDIVIDUALS IN REHAB<br>OR LEAVING REHAB                          | 2,000.  |
| FAITH BAPTIST CHURCH<br>933 S NURSERY ROAD<br>LAPORTE, IN 46350  | N/A  | PC                                   | PURCHASE A PAVILION TO<br>BE USED IN A COMMUNITY<br>PARK   | 5,000.  |
| FAMILIES FIRST COMMUNITY CENTER<br>PO BOX 951, 41 NORTH STREET<br>ELLSWORTH, ME 04654                      | N/A  | PC                                   | UPDATE WEBSITE AND<br>SUPPORT ADVERTISING,<br>POSTAGE AND MORTGAGE<br>NEEDS  | 2,500.  |
| FAMILY CONNECTION, INC.<br>2 WALKER RUN<br>ALABASTER, AL 35007   | N/A  | PC                                   | REPLACE APPLIANCES IN<br>OVERNIGHT YOUTH<br>SHELTER AND REPLACE<br>HVAC UNIT IN<br>COUNSELING CENTER               | 5,000.  |
| FAMILY PROMISE OF GREATER CONCORD<br>79 CLINTON STREET<br>CONCORD, NH 03301                                | N/A  | PC                                   | SUPPORT OF UNEXPECTED<br>BILLS/COSTS FOR<br>FAMILIES   | 5,000.  |
| FEEDING TINY TUMMIES<br>305 PARK AVE.<br>KEENE, NH 03431   | N/A  | NC                                   | FILL GAPS FOR<br>NUTRITIOUS FOOD FOR<br>KIDS AT HOME AND CAMPS<br>DURING THE SUMMER                                | 3,000.  |
| FEEDMORE WNY FOUNDATION<br>100 JAMES E CASEY DR.<br>BUFFALO, NY 14206                                      | N/A  | PC                                   | SERVE MEALS TO NEARLY<br>300 PANTRIES, SOUP<br>KITCHENS, EMERGENCY<br>SHELTERS AND OTHER<br>HUNGER-RELIEF AGENCIES | 5,000.  |
| FELLOWSHIP OF FUNDAMENTAL BIBLE<br>CHURCHES DBA TRI-STATE BIBLE CAMP<br>2 RIVER ROAD<br>MONTAGUE, NJ 07827 | N/A  | PC                                   | COMPLETE THE SWIMMING<br>POOL CONSTRUCTION<br>PROJECT FOR A SUMMER<br>CAMP   | 10,000. |
| FIRST CHRISTIAN CHUCH DISCIPLES OF<br>CHRIST<br>118 WEST WASHINGTON STREET<br>SHELBYVILLE, IN 46176        | N/A  | PC                                   | IMPROVE THE<br>ENVIRONMENT THROUGH A<br>MISSION TRIP TO CLEAN<br>UP BEACHES AND SAND<br>DUNES                      | 2,000.  |
| FIRST CHURCH OF CHRIST, HARTFORD<br>60 GOLD STREET<br>HARTFORD, CT 06103                                   | N/A  | PC                                   | PURCHASE ITEMS FOR<br>THOSE WHO ARE HOMELESS<br>& EQUIPMENT TO STORE<br>AND DISTRIBUTE FOOD                        | 2,000.  |
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|---|--|--------------------------------------|--|--------|
| FISH FOOD BANK<br>1767 - 12TH STREET, #147<br>HOOD RIVER, OR 97031            | N/A  | PC                                   | PURCHASE PERSONAL CARE<br>ITEMS FOR UNHOUSED IN<br>COMMUNITY   | 2,000. |
| FOOD 4 SOULS<br>11807 ALLISONVILLE ROAD #179<br>FISHERS, IN 46038             | N/A  | PC                                   | USED TO BUY SUPPLIES,<br>FUEL AND ANNUAL<br>MAINTENANCE TO A BUS<br>USED FOR A MOBILE FOOD<br>PANTRY | 4,000. |
| FOOD FINDERS FOOD BANK INC.<br>1204 GREENBUSH ST.<br>LAFAYETTE, IN 47904      | N/A  | PC                                   | PURCHASE PRODUCE FOR A<br>FOOD PANTRY  | 2,000. |
| FOREVER LOGAN STRONG FOUNDATION<br>2489 ROUTE 563<br>EGG HARBOR, NJ 08215     | N/A  | PC                                   | HELP SUPPORT LIVING<br>AND MEDICAL EXPENSES<br>FOR ANY CHILD OR ADULT<br>BATTLING CANCER             | 2,000. |
| FOSTADOPT CONNECTIONS<br>4601 E. 32ND ST.<br>TUCSON, AZ 85711                 | N/A  | PC                                   | PROVIDE A WONDERFUL<br>EVENING TO FOSTER<br>YOUTH LIVING IN GROUP<br>HOMES                           | 2,500. |
| FOSTADOPT CONNECTIONS<br>4601 E. 32ND ST.<br>TUCSON, AZ 85711                 | N/A  | PC                                   | GENERAL PROGRAM<br>SUPPORT   | 2,000. |
| FOSTER4LOVE INC<br>1301 SHILOH RD #1630<br>KENNESAW, GA 30144                 | N/A  | PC                                   | SUPPORT OF A CLOTHING<br>CLOSET AND OTHER<br>NEEDS, SUCH AS RENT,<br>UTILITIES, INSURANCE,<br>ETC.   | 5,000. |
| FOUR "E" YOUTH ORGANIZATION<br>115 GRAHAM ST.<br>WASHINGTON, GA 30673         | N/A  | PC                                   | PURCHASE SUPPLIES FOR<br>ARTWORK,<br>SNACKS/LUNCHESES FOR<br>SUMMER CAMP                             | 2,000. |
| FOUR WINDS APOSTOLIC CHURCH<br>821 RUSSELL PARKWAY<br>WARNER ROBINS, GA 31093 | N/A  | PC                                   | PURCHASE FOOD PANTRY<br>ITEMS AND PROVIDE<br>MAINTENANCE TO VAN                                      | 2,000. |
| FRANK OLEAN CENTER, INC.<br>93 AIRPORT ROAD<br>WESTERLY, RI 02891             | N/A  | PC                                   | SUPPORT OF AN ART<br>THERAPY PROGRAM FOR<br>DISABLED CHILDREN AND<br>ADULTS                          | 2,500. |
| <b>Total from continuation sheets</b>   |  |                                      |  |        |

**Part XIV** Supplementary Information

**3 Grants and Contributions Paid During the Year (Continuation)**

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|---|--|--------------------------------------|---|---------|
| FRIENDS OF CHILDREN OF BREVARD<br>2825 JUDGE FRAN JAMIESON WAY<br>MELBOURNE, FL 32940 | N/A  | PC                                   | PROVIDE MISCELLANEOUS<br>ITEMS TO CHILDREN WHO<br>HAVE BEEN REMOVED FROM<br>THEIR HOME                          | 2,000.  |
| FRIENDS OF PRAS<br>5843 JEFFERSON AVE<br>NEWPORT NEWS, VA 23605                       | N/A  | PC                                   | HOST A MICROCHIPPING<br>CLINIC WITH A MOBILE<br>VET TO HELP WITH<br>RETURNING LOST ANIMALS<br>TO THEIR FAMILIES | 2,500.  |
| FRIENDS OF RON<br>4405 ABERDEEN DR.<br>MOUNT LAUREL, NJ 08054                         | N/A  | PC                                   | FEED ABOUT 75 FAMILIES<br>AND SPONSOR 5 FAMILIES<br>FOR THE HOLIDAYS WITH<br>HOLIDAY MEALS AND<br>GIFTS         | 2,500.  |
| FRIENDS OF THE LITTLE WHITE HOUSE<br>238 APPLE BLOSSOM LANE<br>SIMPSONVILLE, SC 29681 | N/A  | PC                                   | TEACH INDEPENDENCE TO<br>THOSE DIAGNOSED WITH<br>ASD BY PURCHASING 4<br>LAPTOPS AND A<br>PROMETHIUM BOARD       | 10,000. |
| FULL PLATES FULL POTENTIAL<br>14 MAINE STREET, BOX 3<br>BRUNSWICK, ME 04011           | N/A  | PC                                   | EXPAND THE AVAILABILTY<br>OF SUMMER MEALS FOR<br>KIDS   | 3,000.  |
| FUREVER FRIENDS RESCUE INC.<br>11351 NW 50TH AVE<br>CHIEFLAND, FL 32626               | N/A  | PC                                   | SPAY AND NEUTER<br>ANIMALS AT AN ANIMAL<br>RESCUE   | 2,000.  |
| GIRLS FOR A CHANGE<br>100 BUFORD ROAD<br>NORTH CHESTERFIELD, VA 23237-1510            | N/A  | PC                                   | SUPPORT OF A<br>CULTURALLY COMPETENT<br>WORKFORCE DEVELOPMENT<br>PROGRAM FOR YOUNG<br>BLACK GIRLS               | 2,000.  |
| GIRLS ON THE RUN GREATER HARTFORD<br>PO BOX 370525<br>WEST HARTFORD, CT 06137         | N/A  | PC                                   | PARTICIPATION<br>SCHOLARSHIPS FOR<br>GIRLS, REPLENISHMENT<br>OF PROGRAM SUPPLIES &<br>MATERIAL                  | 2,500.  |
| GIRLS ON THE RUN GREATER HARTFORD<br>PO BOX 370525<br>WEST HARTFORD, CT 06137         | N/A  | PC                                   | SUPPORT OF<br>REGISTRATION<br>SCHOLARSHIPS  | 10,000. |
| GIVE KIDS THE WORLD<br>210 SOUTH BASS ROAD<br>KISSIMMEE, FL 34746                     | N/A  | PC                                   | PROVIDE ONE CHILD WITH<br>A SERIOUS ILLNESS A<br>WISH   | 7,500.  |
| <b>Total from continuation sheets</b>   |  |                                      |   |         |

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|---|--|--------------------------------------|---|---------|
| GOOD NEWS AT NOON<br>PO BOX 1577<br>GAINESVILLE, GA 30503   | N/A  | PC                                   | PURCHASE OF ONE<br>COMMERCIAL<br>WASHER/DRYER AT A<br>HOMELESS TRANSITIONAL<br>SHELTER                      | 5,000.  |
| GOOD SAMARITAN HAVEN<br>PO BOX 1104<br>BARRE, VT 05641  | N/A  | PC                                   | PURCHASE MATTRESSES<br>AND BED PLATFORMS  | 3,000.  |
| GRACE BAPTIST CHURCH DBA 1025 CHURCH<br>1025 E SPRING ST.<br>MONROE, GA 30656                       | N/A  | PC                                   | PROVIDE THANKSGIVING<br>MEALS FOR LOW INCOME<br>FAMILIES  | 3,000.  |
| GRAHAMTASTIC CONNECTION<br>21 BRADEEN STREET, SUITE 107<br>SPRINGVALE, ME 04083                     | N/A  | PC                                   | PURCHASE TECHNOLOGY<br>FOR CHILDREN WITH<br>CANCER & OTHER<br>ILLNESSES TO SUPPORT<br>THEIR EDUCATION,      | 2,000.  |
| GRANT COUNTY DISTINGUISHED YOUNG<br>WOMEN SCHOLARSHIP PROGRAM<br>1533 N. 500 W.<br>MARION, IN 46952 | N/A  | PC                                   | SCHOLARSHIPS FOR WOMEN  | 1,000.  |
| GREENSBURG COMMUNITY BREAD OF LIFE<br>720 RANDALL STREET<br>GREENSBURG, IN 47240                    | N/A  | PC                                   | GENERAL PROGRAM<br>SUPPORT  | 2,000.  |
| GREENSBURG COMMUNITY BREAD OF LIFE,<br>INC<br>720 RANDALL ST.<br>GREENSBURG, IN 47240               | N/A  | PC                                   | PURCHASE TECHNOLOGY,<br>EQUIPMENT AND SUPPLIES<br>TO SUPPORT A NEW<br>PROGRAM TEACHING LIFE<br>SKILLS       | 8,700.  |
| GROWING FUTURES EARLY EDUCATION<br>CENTER<br>8155 SANTA FE DRIVE<br>OVERLAND PARK, KS 66204         | N/A  | PC                                   | RENOVATE CLASSROOM FOR<br>A HEAD START THAT<br>PROVIDES IMPROVED<br>LEARNING ENVIRONMENTS<br>FOR VULNERABLE | 5,500.  |
| GSS/FOSTER PRIDE<br>250 WEST 94TH ST. # 6F<br>NEW YORK, NY 10025                                    | N/A  | PC                                   | SUPPORT OF FINANCIAL<br>LITERACY PROGRAM NEEDS  | 10,000. |
| GUARDIAN FRIENDS OF LEWIS COUNTY<br>PO BOX 445<br>CHEHALIS, WA 98532                                | N/A  | PC                                   | GENERAL SUPPORT OF<br>PROGRAMS SERVING<br>CHILDREN IN THE FOSTER<br>CARE SYSTEM                             | 5,000.  |
| <b>Total from continuation sheets</b>   |  |                                      |   |         |

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|---|--|--------------------------------------|--|----------|
| H.A.R.T. DBA HOMELESS ANIMALS RESCUE<br>TEAM<br>PO BOX 606<br>MESA, AZ 85211              | N/A  | PC                                   | SUPPORT OF SPAY/NEUTER<br>OF CATS  | 2,000.   |
| HABITAT FOR HUMANITY WEST BAY & N. RI<br>PO BOX 6743<br>WARWICK, RI 02887                 | N/A  | PC                                   | COVER THE INSULATION<br>COST FOR AN ENTIRE<br>HOME TO KEEP IT<br>AFFORDABLE FOR THE NEW<br>HOMEOWNER           | 4,000.   |
| HANDI-CRAFTERS / HC OPPORTUNITY<br>CENTER<br>215 BARLEY SHEAF ROAD<br>THORNDALE, PA 19372 | N/A  | PC                                   | SECURE A NEW SOFTWARE<br>SUSTEM TO TRACK<br>WORKERS AND PAYMENTS,<br>AS WELL AS THE LAUNCH<br>OF A NEW WEBSITE | 6,000.   |
| HARBOR HOUSE OF KANKAKEE<br>PO BOX 1824<br>KANKAKEE, IL 60901                             | N/A  | PC                                   | PROVIDE WOMEN WITH<br>MONEY FOR ESSENTIALS<br>AND RELOCATING TO<br>SECURE HOMES                                | 2,000.   |
| HAVEN OF NORTHEAST ARKANSAS<br>PO BOX 1062<br>BLYTHEVILLE, AR 72315                       | N/A  | PC                                   | PURCHASE A SWING SET<br>FOR A DOMESTIC<br>VIOLENCE SHELTER   | 2,000.   |
| HEBRON INTERFAITH HUMAN SERVICES<br>26 PENDLETON DRIVE, PO BOX 634<br>HEBRON, CT 06248    | N/A  | PC                                   | PROVIDE CLEANING<br>SUPPLIES, HYGIENCE<br>PRODUCTS/SUPPLIES &<br>CLOTHING TO THOSE IN<br>NEED                  | 10,000.  |
| HEMBREE SPRINGS ES PTA<br>815 HEMBREE RD.<br>ROSWELL, GA 30076                            | N/A  | PC                                   | PURCHASE ITEMS FOR<br>STEM AND STAR EVENTS   | 1,000.   |
| HIGH HOPES THERAPEUTIC RIDING<br>36 TOWN WOODS ROAD<br>OLD LYME , CT 06371                | N/A  | PC                                   | ALLOW ANYONE TO<br>PARTICIPATE IN A<br>THERAPEUTIC RIDING<br>PROGRAM THROUGH<br>FINANCIAL AID                  | 5,000.   |
| HILLSIDE SPCA<br>PO BOX 233<br>POTTSVILLE, PA 17901                                       | N/A  | PC                                   | RENOVATION OF AN AREA<br>TO BE CONVERTED INTO A<br>SURGERY SUITE FOR<br>ANIMALS                                | 2,000.   |
| HOLD FOR PROGRAMMING EXPENSES<br>10300 KINCAID DRIVE, SUITE 203<br>FISHERS, IN 46037      | N/A  | PC                                   | GENERAL PROGRAM<br>SUPPORT   | 222,733. |
| <b>Total from continuation sheets</b>   |  |                                      |  |          |

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|--|--|--------------------------------------|--|---------|
| HOLLY'S HOUSE<br>PO BOX 4125, 750 NORTH PARK DRIVE<br>EVANSVILLE, IN 47724                                       | N/A  | PC                                   | FUND DIRECT PROGRAM<br>MATERIALS AND SUPPLIES<br>AT A PROGRAM FOR CHILD<br>ABUSE PREVENTION            | 2,000.  |
| HOSPICE OF ORANGE & SULLIVAN<br>COUNTIES, INC.<br>800 STONY BROOK COURT<br>NEWBURGH, NY 12550                    | N/A  | PC                                   | PURCHASE ITEMS TO<br>ENSURE PATIENTS ARE<br>RECEIVING ADEQUATE<br>END-OF-LIFE CARE                     | 2,500.  |
| HOSPICE OF ORANGE & SULLIVAN<br>COUNTIES, INC.<br>800 STONY BROOK COURT<br>NEWBURGH, NY 12550                    | N/A  | PC                                   | PROVIDE ESSENTIAL<br>SUPPLIES FOR THE CARE<br>OF PATIENTS FOR END OF<br>LIFE CARE                      | 5,000.  |
| HOSPICE OF ORANGE AND SULLIVAN<br>COUNTIES, INC.<br>800 STONY BROOK COURT<br>NEWBURGH, NY 12550                  | N/A  | PC                                   | PURCHASE ITEMS TO<br>ENSURE PATIENTS ARE<br>RECEIVING ADEQUATE<br>END-OF-LIFE CARE                     | 2,700.  |
| HOUSING AUTHORITY OF THE CITY OF<br>FREDERICK<br>209 MADISON STREET<br>FREDERICK, MD 21701                       | N/A  | PC                                   | SUPPORT THE ENRICHMENT<br>OF CHILDREN LIVING IN<br>PUBLIC HOUSING                                      | 2,000.  |
| HOUSTON COUNTY ASSOCIATION FOR<br>EXCEPTIONAL CITIZENS, INC.<br>202 NORTH DAVIS DRIVE<br>WARNER ROBINS, GA 31093 | N/A  | PC                                   | PURCHASE A WHEELCHAIR<br>FOR A PERSON IN NEED<br>WHICH INSURANCE WOULD<br>NOT COVER                    | 3,300.  |
| HUDSON VALLEY HONOR FLIGHT, INC<br>PO BOX 375 (OFFICE 40 MAIN ST)<br>WALDEN, NY 12586                            | N/A  | PC                                   | PROVIDE VETERANS AN<br>UNFORGETTABLE TRIP TO<br>WASHINGTON DC AT NO<br>COST                            | 10,000. |
| HUMANE SOCIETY FOR HAMILTON COUNTY<br>10501 HAGUE ROAD<br>FISHERS, IN 46038                                      | N/A  | PC                                   | PROVIDE EMERGENCY<br>MEDICAL CARE TO SOME<br>OF THE MOST DIRE<br>ANIMAL CASES CURRENTLY<br>IN OUR CARE | 5,000.  |
| HUMANE SOCIETY FOR HAMILTON COUNTY<br>10501 HAGUE ROAD<br>FISHERS, IN 46038                                      | N/A  | PC                                   | FUND LIFE-SAVING<br>MEDICAL CARE FOR<br>ANIMALS  | 2,000.  |
| HUMANE SOCIETY OF ELMORE COUNTY<br>255 CENTRAL PLANK ROAD<br>WETUMPKA, AL 36092                                  | N/A  | PC                                   | REPLACE HEATERS IN<br>ADOPTABLE ANIMAL<br>BUILDING   | 3,000.  |
| <b>Total from continuation sheets</b>  |  |                                      |  |         |

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|---|--|--------------------------------------|---|--------|
| HUMANE SOCIETY OF THE NATURE COAST<br>7200 MOBLEY ROAD<br>BROOKSVILLE, FL 34601                         | N/A  | PC                                   | PURCHASE 2 MACHINES<br>NEEDED FOR MEDICAL<br>PROCEDURES ON ANIMALS  | 2,500. |
| HUNGER FIGHT<br>2935 DAWN RD.<br>JACKSONVILLE, FL 32207   | N/A  | PC                                   | PURCHASE FOOD AND<br>BOOKS FOR CHILDREN IN<br>THE LOCAL COMMUNITY   | 2,000. |
| HUNGER FIGHT<br>2935 DAWN RD.<br>JACKSONVILLE, FL 32207   | N/A  | PC                                   | PROVIDE MEALS AND<br>BOOKS TO MEMBERS OF<br>THE COMMUNITY   | 2,000. |
| IMPACT RESOURCES<br>946 LOGGERHEAD ISLAND DRIVE<br>SATELLITE BEACH, FL 32937                            | N/A  | PC                                   | FORM SERVICE<br>COMMUNITIES IN<br>CHURCHES, SOCIAL<br>GROUPS, FAMILIES AND<br>UNIVERSITIES                          | 2,000. |
| IN YOUR SHOES - THE SOPHIA CAPO<br>MEMORIAL FOUNDATION<br>3743 DOTWOOD ST. NW<br>NORTH CANTON, OH 44720 | N/A  | PC                                   | ALLOCATE FUNDS FOR A<br>MEMORIAL SCHOLARSHIP<br>AND A PATIENT<br>ASSISTANCE PROGRAM                                 | 8,000. |
| ISABELLE ACADEMY OF FILM & CREATIVE<br>ARTS<br>4701 MERIDIAN ST. N., SUITE G<br>HUNTSVILLE, AL 35810    | N/A  | PC                                   | HANDS-ON APPLICATION<br>OF KNOWLEDGE,<br>EDUCATION AND<br>CREATIVITY TO THE<br>OVERALL WELL-BEING OF                | 1,500. |
| ISLAMIC ASSOCIATION OF ERIE<br>2419 HOLLAND STREET<br>ERIE, PA 16503                                    | N/A  | PC                                   | PROVIDE A TECHNOLOGY<br>ROOM/COMPUTERS FOR<br>FAMILIES OF LOW INCOME<br>THAT NEED ASSISTANCE &<br>CHILDREN LEARNING | 2,500. |
| ISLAMIC ASSOCIATION OF ERIE<br>2419 HOLLAND STREET<br>ERIE, PA 16503                                    | N/A  | PC                                   | UPDATES TO EDUCATIONAL<br>ROOM FOR YOUNG WOMEN<br>AND ADULTS  | 2,500. |
| JACOB'S LADDER CREATIVE LEARNING<br>CENTER<br>310 GREEN STREET<br>ALEXANDER CITY, AL 35010              | N/A  | PC                                   | PURCHASE OF EQUIPMENT<br>NEEDED FOR UPGRADES TO<br>A DAYCARE  | 2,500. |
| JONNYCAKE CENTER OF WESTERLY<br>23 INDUSTRIAL DRIVE<br>WESTERLY, RI 02891                               | N/A  | PC                                   | PURCHASE AND INSTALL A<br>POINT OF SALE SYSTEM<br>TO BE USED IN A THRIFT<br>STORE                                   | 4,850. |
| <b>Total from continuation sheets</b>   |  |                                      |   |        |

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|---|---|--------------------------------|---|--------|
| JOURNEY TO HOUSING PROGRAM<br>44800 WARREN ROAD<br>CANTON, MI 48170-3952                    | N/A   | PC                             | SUPPORT OF A HOMELESS ASSISTANCE PROGRAM  | 2,500. |
| JOY'S HOUSE<br>2028 E BROAD RIPPLE AVE,<br>INDIANAPOLIS, IN 46220 INDIANAPOLIS,<br>IN 46220 | N/A   | PC                             | UPDATE TECHNOLOGY FOR PROGRAMMING   | 4,000. |
| JXN HARM REDUCTION<br>301 STEWARD AVE., BLD. I, #8<br>JACKSON, MI 49201                     | N/A   | PC                             | PURCHASE SUPPLIES SUCH AS SYRINGES, COTTON BALLS, STERILE WATER, ETC. THAT ARE CRITICAL TO THE OPERATIONS | 2,000. |
| K9 HEROES 4 HEROES<br>400 APPLETREE COURT<br>PAINESVILLE, OH 44077                          | N/A   | PC                             | FUND THE PURCHASE OF A SERVICE DOG, TRAINING, VET COSTS AND EQUIPMENT FOR A VETERAN                       | 5,000. |
| KANSAS CITY AUTISM TRAINING CENTER, INC.<br>10842 MCGEE ST.<br>KANSAS CITY, MO 64114        | N/A   | PC                             | PURCHASE PLAYGROUND EQUIPMENT   | 5,000. |
| KID'S CLOSET MINISTRY, NJUMC<br>210 CENTRAL AVENUE<br>NORTH JUDSON, IN 46366                | N/A   | PC                             | PURCHASE BACKPACKS AND SCHOOL SUPPLIES FOR 500 CHILDREN   | 2,000. |
| KINDRED HEARTS SC (KHSC)<br>POB 290154<br>COLUMBIA, SC 29229                                | N/A   | PC                             | DEVELOP KINSHIP CIRCLES IN THE COMMUNITY TO SUPPORT FAMILIES CARING FOR OTHER FAMILY                      | 2,000. |
| KINGDOM FITNESS FOUNDATION INC<br>112 CONSTITUTION DR.<br>WARNER ROBINS, GA 31088           | N/A   | PC                             | PURCHASE SUPPLIES FOR YOUTH BOXING  | 7,000. |
| KINGDOM SHIFTERS CHRISTIAN EMPOWERMENT CENTER<br>811 W MCGALLIARD STE 7<br>MUNCIE, IN 47303 | N/A   | PC                             | PURCHASE SOFTWARE, EQUIPMENT, AND PROGRAMS NEEDED TO ASSIST WITH VIRTUAL AND IN HOUSE TRAINING            | 2,000. |
| KITTY KOTTAGE<br>131 EAST SELMA STREET<br>DOTHAN, AL 36301                                  | N/A   | PC                             | PROVIDE FOR THE PROPER HEALTH CERTIFICATES REQUIRED TO TRANSPORT ANIMALS ACROSS STATE LINES               | 2,000. |
| <b>Total from continuation sheets</b>   |   |                                |   |        |

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|--|--|--------------------------------------|--|---------|
| KNK FOUNDATION<br>24913 WOODFIELD SCHOOL RD<br>GAITHERSBURG, MD 20882                            | N/A  | PC                                   | HELP ADULTS & CHILDREN<br>LIVING WITH<br>INTELLECTUAL &<br>PHYSICAL DISABILITIES<br>LIVE A LIFE OF PURPOSE         | 2,000.  |
| LEAD WITH LOVE CORPORATION<br>40 E. 9TH ST., 1518<br>CHICAGO, IL 60605                           | N/A  | PC                                   | TRANSFORM A VACANT LOT<br>INTO A COMMUNITY<br>GARDEN & WELLNESS<br>CENTER FOR THOSE WHO<br>HAVE EXPERIENCED        | 2,000.  |
| LEADERSHIP LACKAWANNA<br>222 MULBERRY STREET<br>SCRANTON, PA 18503                               | N/A  | PC                                   | PROVIDE AND INSTALL<br>THE TRAIL MARKING<br>SYSTEM CUSTOMIZED FOR<br>CAMP FREEDOM                                  | 6,000.  |
| LEARN LIVE LOVE CANCER OUTREACH<br>PROGRAM<br>PO BOX 292<br>SCITUATE, MA 02066                   | N/A  | PC                                   | PROVIDE MONEY TO HELP<br>CANCER PATIENTS PAY<br>FOR BILLS  | 2,000.  |
| LEBANON COUNTY CHRISTIAN MINISTRIES<br>250 S. 7TH STREET<br>LEBANON, PA 17042                    | N/A  | PC                                   | PROVIDE FINANCIAL<br>SUPPORT TO PARTIALLY<br>FUND THE SUPPLIES TO<br>ENSURE THOSE NEEDING A<br>MEAL ARE ABLE TO    | 2,000.  |
| LIFECONNECTIONS SPECIALIZED SUPPORT<br>SERVICES<br>83 LAFAYETTE DRIVE<br>HAMPTON FALLS, NH 03844 | N/A  | PC                                   | PURCHASE RECREATIONAL<br>EQUIPMENT, TECHNOLOGY<br>AND SENSORY EQUIPMENT<br>FOR INDIVIDUALS WITH<br>INTELLECTUAL &  | 10,000. |
| LITTLE RED DOOR CANCER AGENCY<br>1801 N MERIDIAN ST<br>INDIANAPOLIS, IN 46202                    | N/A  | PC                                   | PROVIDE FREE<br>TRANSPORTATION<br>ASSISTANCE TO<br>LOW-INCOME AND<br>MEDICALLY UNDERSERVED                         | 2,000.  |
| LIVINGSTON COUNTY HUMANE SOCIETY<br>21179 N. 1358 EAST RD.<br>PONTIAC, IL 61764                  | N/A  | PC                                   | NEW FLOORING, WALL<br>PANELS, CABINETS, WALL<br>ATTACHED CAT HABITATS<br>& NEW WINDOWS IN CAT<br>RESCUE            | 2,000.  |
| LOAVES & FISHES<br>721 KASOTA AVENUE SE<br>MINNEAPOLIS, MN 55414                                 | N/A  | PC                                   | PURCHASE FOOD AND<br>SUPPORT OTHER BUILDING<br>FEES  | 3,000.  |
| MABELS ORPHANED ANGELS RESCUE<br>4045 CALVERT AVENUE<br>CHESAPEAKE BEACH, MD 20732               | N/A  | PC                                   | INSTALL INSULATED<br>OUTBUILDING FOR FERAL<br>CATS TO RECOVER FROM<br>STERILIZATION SURGERY,<br>INJURY AND ILLNESS | 2,000.  |
| <b>Total from continuation sheets</b>  |  |                                      |  |         |

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|---|--|--------------------------------------|--|---------|
| MAC A CHEEK LEARNING CENTER<br>1130 WEST SANDUSKY AVE.<br>BELLEFONTAINE, OH 43311                                       | N/A  | PC                                   | PURCHASE ITEMS TO<br>CREATE A REST AND<br>RELAXATION AREA FOR<br>TEACHERS  | 2,000.  |
| MADISON LION'S CLUB<br>PO BOX 2<br>MADISON, FL 32341  | N/A  | NC                                   | PURCHASE FOOD FOR<br>LOCAL FAMILIES NEEDING<br>ASSISTANCE  | 5,000.  |
| MAKE A WISH MICHIGAN<br>7600 GRAND RIVE AVE, SUITE 175<br>BRIGHTON, MI 48114  | N/A  | PC                                   | GENERAL PROGRAM<br>SUPPORT   | 20,000. |
| MAKE A WISH MICHIGAN<br>7600 GRAND RIVER AVE. SUITE 175<br>BRIGHTON, MI 48114   | N/A  | PC                                   | GENERAL PROGRAM<br>SUPPORT   | 1,500.  |
| MAKE WAY FOR BOOKS<br>700 N STONE AVE<br>TUCSON, AZ 85705-8351  | N/A  | PC                                   | ENSURE YOUNG CHILDREN<br>HAVE QUALITY EARLY<br>LITERACY & LEARNING<br>OPPORTUNITIES THAT<br>PREPARE THEM TO THRIVE | 5,000.  |
| MAKE-A-WISH GREATER PENNSYLVANIA AND<br>WEST VIRGINIA<br>THE GULF TOWER, 707 GRANT ST. FLOOR 37<br>PITTSBURGH, PA 15219 | N/A  | PC                                   | FUND A WISH FOR A<br>CRITICAL ILL CHILD  | 5,000.  |
| MAKE-A-WISH MICHIGAN<br>7600 GRAND RIVE AVE, SUITE 175<br>BRIGHTON, MI 48114  | N/A  | PC                                   | FUND COSTS DIRECTLY<br>RELATED TO<br>WISH-GRANTING FOR<br>CHILDREN WITH CRITICAL<br>ILLNESSES                      | 5,000.  |
| MAKE-A-WISH MICHIGAN<br>7600 GRAND RIVER AVE., SUITE 175<br>BRIGHTON, MI 48114  | N/A  | PC                                   | FUND COSTS RELATED TO<br>WISH-GRANTING FOR<br>CHILDREN WITH CRITICAL<br>ILLNESSES                                  | 5,000.  |
| MARTIN COUNTY HUMANE SOCIETY<br>507 N. OAK ST.<br>LOGOOTE, IN 47553   | N/A  | PC                                   | REPLACE AND EXTEND A<br>FENCE  | 5,000.  |
| MENTAL HEALTH AMERICA OF BOONE COUNTY<br>1122 N. LEBANON CT.<br>LEBANON, IN 46052                                       | N/A  | PC                                   | FUND INTERNET ACCESS<br>AND NECESSARY<br>EQUIPMENT FOR<br>SURVIVORS AND THEIR<br>FAMILIES                          | 2,500.  |
| <b>Total from continuation sheets</b>   |  |                                      |  |         |

**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

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|--|--|--------------------------------------|---|---------|
| MENTORSTARK<br>PO BOX 35302<br>CANTON, OH 44735  | N/A  | PC                                   | RECRUIT, BACKGROUND<br>CHECK AND TRAIN 100<br>LOCAL MENTORS<br>REPRESENTING A VARIETY<br>OF CAREERS &       | 9,500.  |
| MERCY MALL OF VIRGINIA<br>7519 WHITEPINE ROAD<br>NORTH CHESTERFIELD, VA 23237                                  | N/A  | PC                                   | PURCHASE SPECIFIC<br>ITEMS NEEDED BY<br>HOMELESS FAMILIES THAT<br>ARE LIVING IN HOTELS<br>OR BEING REHOUSED | 10,000. |
| MIDWEST FOOD BANK NEW ENGLAND<br>440 ADAMS ST<br>MANCHESTER, CT 06042  | N/A  | PC                                   | NEW EQUIPMENT TO KEEP<br>THE FACILITY WORKING<br>PROPERLY   | 4,000.  |
| MIDWEST FOOD BANK NEW ENGLAND<br>440 ADAMS ST.<br>MANCHESTER, CT 06042   | N/A  | PC                                   | SIGNAL BOOSTING SYSTEM<br>WHICH WILL ALLOW CELL<br>PHONES TO WORK<br>PROPERLY                               | 2,000.  |
| MIRACLE LEAGUE OF NORTHAMPTON<br>TOWNSHIP PA<br>PO BOX 453<br>RICHBORO, PA 18954                               | N/A  | PC                                   | SUPPORT OF BASKETBALL,<br>BASEBALL AND SOCCER<br>TEAMS  | 1,000.  |
| MISSION K9 RESCUE<br>30234 JOHNSON ALLEY<br>MAGNOLIA, TX 77355   | N/A  | PC                                   | GENERAL PROGRAM<br>SUPPORT  | 10,000. |
| MONKEY'S PACK INC.<br>PO BOX 1791, 119 WHITE STREET<br>MANCHESTER, CT 06042                                    | N/A  | PC                                   | COVER ALL MEDICAL<br>BILLS, MEDICINE FOR<br>TREATMENT & ONGOING<br>MEDICINE WHILE IN<br>FOSTER HOMES        | 2,000.  |
| MONKEY'S PACK INC.<br>PO BOX 1791, 119 WHITE STREET<br>MANCHESTER, CT 06042                                    | N/A  | PC                                   | COVER THE COST OF<br>SPAY/NEUTER NEEDS AT<br>AN ANIMAL SHELTER  | 8,000.  |
| MORE THAN A PHONE<br>10300 KINCAID DRIVE, SUITE 203<br>FISHERS, IN 46037                                       | N/A  | PC                                   | GENERAL PROGRAM<br>SUPPORT  | 5,000.  |
| MOSAIC: INTERFAITH YOUTH ACTION<br>(FORMERLY KIDS4PEACE BOSTON)<br>PO BOX 610059<br>NEWTON HIGHLANDS, MA 02461 | N/A  | PC                                   | GENERAL SUPPORT OF<br>PROGRAM   | 2,000.  |
| <b>Total from continuation sheets</b>  |  |                                      |   |         |

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| MYSTIC AQUARIUM<br>55 COOGAN BLVD.<br>MYSTIC, CT 06355   | N/A  | PC                                   | PROVIDE SHADE<br>STRUCTURES, A SCALE<br>AND A POOL DIVIDER IN<br>A BELUGA WHALE EXHIBIT         | 5,000. |
| NEPA YOUTH SHELTER<br>541 WYOMING AVENUE<br>SCRANTON, PA 18509   | N/A  | PC                                   | PROVIDE FUNDING FOR<br>YOUNG PEOPLE IN<br>NORTHEASTERN<br>PENNSYLVANIA<br>EXPERIENCING          | 2,000. |
| NEVER ALONE, INC.<br>291 ROPE MILL ROAD<br>WOODSTOCK, GA 30188   | N/A  | PC                                   | SECURE FOOD THROUGH<br>THE ATLANTA COMMUNITY<br>FOOD BANK FOR A FOOD<br>PANTRY                  | 2,000. |
| NEW ENGLAND SCIENCE & SAILING<br>FOUNDATION (NESS)<br>PO BOX 733, WATER STREET<br>STONINGTON, CT 06378 | N/A  | PC                                   | SAFETY EQUIPMENT FOR A<br>PROGRAM PROVIDING<br>SAILING LESSONS TO<br>UNDERSERVED<br>POPULATIONS | 6,000. |
| NEW HOPE ANIMAL RESCUE CENTER<br>526 ATKINSON STREET<br>HENDERSON, KY 42420                            | N/A  | PC                                   | CONSTRUCTION OF A<br>BUILDING ADJACENT TO<br>THE CURRENT SHELTER                                | 6,600. |
| NEWDAY FOUNDATION OF LAPORTE, INC<br>PO BOX 13<br>LAPORTE, IN 46352                                    | N/A  | PC                                   | GAS CARDS AND TOLLS<br>FOR PATIENTS ATTENDING<br>APPOINTMENTS FOR<br>CANCER TREATMENT           | 1,000. |
| NOELLE'S LIGHT, INC.<br>400 HIGHWAY<br>RIVERTON, NJ 08077  | N/A  | PC                                   | SUPPORT FINANCIALLY<br>DISTRESSED FAMILIES<br>FACING A<br>LIFE-THREATENING FETAL<br>DIAGNOSIS   | 3,000. |
| NOELLE'S LIGHT, INC.<br>400 HIGHWAY<br>RIVERTON, NJ 08077  | N/A  | PC                                   | SUPPORT FINANCIALLY<br>DISTRESSED FAMILIES<br>FACING A<br>LIFE-THREATENING FETAL<br>DIAGNOSIS   | 3,000. |
| NORTHAMPTON SURVIVAL CENTER<br>265 PROSPECT STREET<br>NORTHAMPTON, MA 01060                            | N/A  | PC                                   | PURCHASE FOOD TO BE<br>SERVED AT A FOOD<br>PANTRY   | 2,500. |
| NORTHEAST OPPORTUNITIES FOR WELLNESS,<br>INC.<br>P.O. BOX 206<br>PUTNAM, CT 06260                      | N/A  | PC                                   | PURCHASE SUPPLIES FOR<br>A LIFE SKILLS CLASS<br>OFFERED TO HIGH SCHOOL<br>STUDENTS              | 5,000. |
| <b>Total from continuation sheets</b>  |  |                                      |   |        |

**Part XIV Supplementary Information**

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| NORTHWEST IOWA AMERICAN LEGION RIDERS<br>110 PLYMOUTH ST SW<br>LE MARS, IA 51031                              | N/A  | NC                                   | PURCHASE ITEMS NEEDED<br>TO SUPPORT VETERANS<br>AND THEIR FAMILIES                                | 2,000.  |
| OINKING ACRES FARM RESCUE AND<br>SANCTUARY<br>8420 N CO RD 650 E<br>BROWNSBURG, IN 46112                      | N/A  | PC                                   | SUPPORT DIGGING A WELL<br>AND ADDING WATER LINES<br>TO A FARM                                     | 7,500.  |
| OKEECHOBEE FRATERNAL ORDER OF POLICE<br>ASSOCIATES, LODGE 69, INC.<br>4351 HWY 441 N.<br>OKEECHOBEE, FL 34972 | N/A  | NC                                   | PROMOTE POSITIVE<br>INTERACTION BETWEEN<br>LAW ENFORCEMENT<br>OFFICERS, THEIR<br>FAMILIES AND THE | 2,000.  |
| OPEN PANTRY COMMUNITY SERVICES<br>287 STATE STREET<br>SPRINGFIELD, MA 01101                                   | N/A  | PC                                   | PURCHASE A<br>REFRIGERATED BOX TRUCK<br>TO DELIVER FOOD   | 10,000. |
| OPERATION HOMEFRONT<br>21 FRANKLIN ST, STE 2<br>QUINCY, MA 02169  | N/A  | PC                                   | STABLIZE FAMILIES<br>EXPERIENCING<br>SHORT-TERM FINANIAIL<br>CHALLENGES                           | 10,000. |
| OUR LADY'S INN<br>8790 MANCHESTER ROAD, SUITE 202<br>ST. LOUIS, MO 63144                                      | N/A  | PC                                   | REPLACE AND INSTALL<br>UPGRADES TO EXISTING<br>SECURITY SYSTEM AT A<br>MATERNITY HOME             | 2,000.  |
| OWL HOLLOW FARM<br>10908 SOUTH HUNT RD.<br>LONE JACK, MO 64070  | N/A  | PC                                   | PLACE HIGH OUTPUT,<br>COMMERCIAL, SOLAR<br>LIGHTS IN MAIN ARENA,<br>DRIVEWAY AND PARKING<br>AREA  | 3,500.  |
| PAIGE'S KINDNESS PROJECT<br>2 LASSEN CT.<br>MILFORD, DE 19963   | N/A  | PC                                   | PURCHASE ITEMS TO<br>SUPPORT THE HOMELESS<br>AND ELDERLY IN THE<br>COMMUNITY                      | 2,500.  |
| PARTNERS FOR PETS, INC.<br>4011 MAINTENANCE DR.<br>MARIANNA, FL 32448   | N/A  | PC                                   | PROVIDE SPAY/NEUTER<br>SERVICES FOR ANIMALS<br>ENTERING THE SHELTER                               | 2,000.  |
| PARTNERS FOR PETS, INCORPORATED<br>4011 MAINTENANCE DRIVE<br>MARIANNA, FL 32448-7215                          | N/A  | PC                                   | PROVIDE MEDICAL<br>TREATMENTS FOR ANIMALS<br>IN THEIR CARE  | 2,000.  |
| <b>Total from continuation sheets</b>   |  |                                      |   |         |

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| PAWSITIVE WARRIORS RESCUE2000<br>11348 MARQUART RD.<br>NEW CARLISLE, OH 45344                                    | N/A  | PC                                   | PURCHASE A NEW<br>FINANCIAL AND<br>REPORTING SYSTEM   | 2,000.  |
| PEACE RESTORED, INC.<br>480 SAINT CLAIR STREET<br>MOORESVILLE, IN 46158  | N/A  | PC                                   | EXPAND FREE COUNSELING<br>SERVICES TO WOMEN<br>IMPACTED BY ABUSE,<br>TRAUMA AND GRIEF                       | 2,000.  |
| PERCEPTION PROGRAMS<br>842 MAIN STREET<br>WILLIMANTIC, CT 06226  | N/A  | PC                                   | PROVIDE SMALL GIFTS TO<br>HELP LIFT SPIRITS OF<br>THOSE SUFFERING FROM<br>ADDICTION                         | 1,200.  |
| PERRY COUNTY HUMANE SOCIETY<br>8365 ILLINOIS STATE ROUTE 14<br>DU QUOIN, IL 62832-4051                           | N/A  | PC                                   | CREATE A SAFE,<br>DISTRACTION FREE ROOM<br>FOR POTENTIAL ADOPTERS<br>TO MEET WITH THEIR<br>DESIRED ADOPTEES | 10,000. |
| PETTIS COUNTY COMMUNITY SANTA/SEDALIA<br>HERITAGE FOUNDATION, INC.<br>600 EAST 3RD. STREET<br>SEDALIA , MO 65301 | N/A  | PC                                   | PROVIDE CHRISTMAS<br>GIFTS TO NEEDY<br>CHILDREN IN PETTIS<br>COUNTY   | 2,000.  |
| PFLAG HANOVER INC<br>174 E. MAIN ST.<br>HANOVER, IN 47243  | N/A  | PC                                   | FURNISH A SPACE FOR<br>YOUTH AND THEIR<br>FAMILIES  | 10,000. |
| PHILADELPHIA ANIMAL WELFARE SOCIETY<br>(PAWS)<br>100 N. 2ND STREET<br>PHILADELPHIA, PA 19106                     | N/A  | PC                                   | SUPPORT OF MEDICAL<br>NEEDS FOR ANIMAL<br>SHELTER PETS  | 2,000.  |
| PIQUA COMPASSION NETWORK - MOTE PARK<br>125 BRIDGE STREET, SUITE 200<br>PIQUA, OH 45356                          | N/A  | PC                                   | RENOVATE AND FURNISH A<br>BUILDING FOR A TEEN<br>CENTER   | 2,000.  |
| PIQUA COMPASSION NETWORK<br>325 W. ASH STREET<br>PIQUA, OH 45356   | N/A  | PC                                   | PURCHASE EQUIPMENT TO<br>PROVIDE ACTIVITIES FOR<br>FITNESS EDUCATION  | 2,000.  |
| PLAYGROUND FOR ALL<br>315 N. BONHAM STREET<br>MACOMB, IL 61455   | N/A  | PC                                   | CREATE AN ADDITION TO<br>EXISTING PLAYGROUND AT<br>ELEMENTARY SCHOOL  | 5,000.  |
| <b>Total from continuation sheets</b>  |  |                                      |   |         |

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| PRIEST RIVER MINISTRIES<br>6501 HWY 2, PO BOX 334<br>PRIEST RIVER, ID 83856   | N/A  | PC                                   | GENERAL SUPPORT OF<br>FAMILIES ENTERING<br>SERVICES PROVIDED   | 2,000.  |
| PROJECT ADAM COMMUNITY ASSISTANCE<br>CENTER, INCORPORATED<br>112 LANTHIER STREET, P.O. BOX 2<br>WINDER, GA 30680                      | N/A  | PC                                   | OFFSET CURRENT FOOD<br>BUDGET AT A<br>TRANSITIONAL HOME FOR<br>THOSE RECOVERING FROM<br>ADDICTION                    | 2,000.  |
| PROJECT ADAM COMMUNITY ASSISTANCE<br>CENTER, INCORPORATED<br>112 LANTHIER STREET, P.O. BOX 2, 112<br>LANTHIER STREET WINDER, GA 30680 | N/A  | PC                                   | TECHNOLOGY UPGRADES<br>INCLUDING ADDING<br>WINDOWS 10 TO EXISTING<br>COMPUTERS IN ORDER TO<br>MAINTAIN FUNCTIONALITY | 4,200.  |
| PROJECT ADAM COMMUNITY ASSISTANCE<br>CENTER, INCORPORATED<br>112 LANTHIER STREET; P.O. BOX 2<br>WINDER, GA 30680                      | N/A  | PC                                   | OFFSET FOOD COSTS FOR<br>RESIDENTIAL DRUG AND<br>ALCOHOL FACILITY  | 2,000.  |
| PROVIDENCE CRISTO REY HIGH SCHOOL<br>2717 S. EAST STREET<br>INDIANAPOLIS, IN 46225  | N/A  | GOV                                  | GENERAL PURCHASES<br>NEEDED FOR MONTHLY<br>SUPPORT EVENTS  | 10,000. |
| PROVISO ELITE TRACK CLUB<br>1929 S. 8TH AVENUE<br>MAYWOOD, IL 60153   | N/A  | PC                                   | PROVIDE LOW INCOME<br>ATHLETES WITH A<br>UNIFORM AND OTHER<br>EXPENSES   | 2,000.  |
| PURE HEART FOUNDATION<br>8425 W MCNICHOLS RD.<br>DETROIT, MI 48221-2546   | N/A  | PC                                   | SUPPORT CHILDREN WITH<br>INCARCERATED PARENTS<br>BY PROVIDING A FREE<br>STORE TO OBTAIN<br>ESSENTIAL ITEMS           | 10,000. |
| RALLY 2 GIVE<br>32 LOWELL RD.<br>CONCORD, MA 01742  | N/A  | NC                                   | TRANSPORTATION COSTS<br>FOR A NONPROFIT WHO<br>GIVES SNOWBOARDING<br>LESSONS & MENTORING<br>SUPPORT TO THOSE IN      | 10,000. |
| RAY OF HOPE MISSION CENTER<br>960 CRAIGTOWN RD<br>PORT DEPOSIT, MD 21904  | N/A  | PC                                   | ASSIST FAMILIES IN<br>NEED DURING THE<br>HOLIDAYS  | 2,000.  |
| RAY OF HOPE MISSION CENTER<br>960 CRAIGTOWN RD.<br>PORT DEPOSIT, MD 21904   | N/A  | PC                                   | PURCHASE TOYS FOR<br>CHRISTMAS GIVEAWAY  | 2,500.  |
| <b>Total from continuation sheets</b>   |  |                                      |  |         |

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| RYAN'S PLACE<br>P.O. BOX 73<br>GOSHEN, IN 46527  | N/A  | PC                                   | PURCHASE SUPPLIES FOR<br>ACTIVITIES AT A GRIEF<br>SUPPORT GROUP FOR<br>CHILDREN, TEENS AND<br>FAMILIES       | 1,000. |
| SAFE HAVEN OF MT. CARMEL<br>217 WEST 3RD STREET<br>MOUNT CARMEL, IL 62863                        | N/A  | PC                                   | PLACE A PRIVACY FENCE<br>ON A PLAYGROUND FOR<br>SAFETY   | 5,000. |
| SANDY HOOK PROMISE<br>P.O. BOX 3489<br>NEWTOWN, CT 06470   | N/A  | PC                                   | INTEGRATE A EARLY<br>WARNING SIGN REPORTING<br>SYSTEM IN SCHOOLS FOR<br>VIOLENCE PREVENTION                  | 5,000. |
| SANDY HOOK PROMISE<br>PO BOX 3489<br>NEWTOWN, CT 06470   | N/A  | PC                                   | GENERAL PROGRAM<br>SUPPORT   | 5,000. |
| SARANAC LAKE YOUTH CENTER<br>PO BOX 1003, 29 WOODRUFF ST.<br>SARANAC LAKE, NY 12983              | N/A  | PC                                   | SUPPORT OF A BICYCLE<br>REPAIR PROGRAM AT A<br>CENTER FOR YOUTH  | 5,000. |
| SCHOOL OF THE CREATIVES<br>9960 SHOSHONE WAY<br>RANDALLSTOWN, MD 21133                           | N/A  | PF                                   | LEASE A BUILDING IN<br>COMMUNITY TO HELP<br>YOUTH FROM AGES 9-15<br>WITH AN AFTER SCHOOL<br>PROGRAM AND CAMP | 2,000. |
| SECOND NATURE WILDLIFE REHABILITATION<br>22030 FANCY FARM RD<br>THOMPSONVILLE, IL 62890          | N/A  | PC                                   | GENERAL PURCHASES<br>NEEDED FOR UPGRADES<br>AND FEEDING  | 2,000. |
| SERVING TIME OF THE CSRA (SERVING<br>TIME JAIL MINISTRY)<br>5011 SUSSEX DRIVE<br>EVANS, GA 30809 | N/A  | PC                                   | PURCHASE AND PROVIDE<br>BIBLES FOR JAIL<br>INMATES   | 1,500. |
| SHEPHERD COMMUNITY CENTER<br>4107 E. WASHINGTON ST.<br>INDIANAPOLIS, IN 46201                    | N/A  | PC                                   | PROVIDE FEE TO FUND A<br>LITERACY PROGRAM FOR<br>CHILDREN  | 5,000. |
| SHEPHERD'S CENTER OF HAMILTON COUNTY<br>1250 CONNER STREET<br>NOBLESVILLE, IN 46060              | N/A  | PC                                   | PROVIDE OLDER ADULTS<br>WITH A CHRISTMAS<br>EXPERIENCE   | 2,000. |
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| SHIAWASSEE FAMILIES AGAINST NARCOTICS<br>6800 EAST M-71<br>DURAND, MI 48428   | N/A  | PC                                   | SUPPORT FOR THOSE<br>INDIVIDUALS AND<br>FAMILIES SUFFERING<br>FROM DRUG AND ALCOHOL<br>ADDICTION            | 3,000.  |
| SOUTH SHORE RECOVERY HOME INC<br>10 DYSART ST.<br>QUINCY, MA 02169  | N/A  | PC                                   | HELP MEET THE FEDERAL<br>AND STATE MANDATED ADA<br>UPGRADES FOR A<br>RECOVERY HOME                          | 4,100.  |
| SPECIALIZED EQUINE SERVICES AND<br>THERAPEUTIC RIDING (SES)<br>722 GIANT CITY ROAD<br>MAKANDA, IL 62958                           | N/A  | PC                                   | PURCHASE OF ONE OR<br>MORE HORSES OR MULES<br>FOR THERAPEUTIC RIDING<br>LESSONS                             | 10,000. |
| SPIRIT & TRUTH APOSTOLIC CHURCH<br>520 HARTFORD TURNPIKE, SUITE Z<br>VERNON, CT 06066   | N/A  | PC                                   | AWARD SCHOLARSHIPS TO<br>COLLEGE STUDENTS TO<br>ENABLE THEM TO<br>PURCHASE BOOKS AND<br>SCHOOL SUPPLIES     | 2,000.  |
| ST LUKE'S IN THE DESERT DBA ST LUKE'S<br>HOME<br>615 EAST ADAMS STREET<br>TUCSON, AZ 85705-6741                                   | N/A  | PC                                   | SUPPORT THE TRAINING<br>COST OF 2 ESSENTIAL<br>CERTIFIED CAREGIVERS   | 4,400.  |
| ST. ROCCO, CLEVELAND, OHIO<br>3205 FULTON RD.<br>CLEVELAND, OH 44109  | N/A  | PC                                   | SUPPORT OF COMMUNITY<br>FOOD PANTRY,<br>RECONSTRUCTION AND<br>TUITION ASSISTANCE<br>PROGRAMS                | 10,000. |
| STANDUP INC SPEAKING TRUTH AND NEVER<br>DOUBTING UNLIMITED POTENTIAL<br>6600 SUGARLOAF PARKWAY, SUITE 400-375<br>DULUTH, GA 30097 | N/A  | PC                                   | PROVIDE HIGH SCHOOL<br>SENIORS WITH<br>SCHOLARSHIP FUNDS  | 4,000.  |
| STRATEGIES FOR A STRONGER SANFORD<br>PO BOX 958, 123 A EMERY ST.<br>SANFORD, ME 04073   | N/A  | PC                                   | PURCHASE SCHOOL<br>SUPPLIES, BOOKS, OR<br>ANY RELEVANT MATERIALS<br>TO SUPPORT AT RISK<br>STUDENTS          | 2,500.  |
| STRAY CAT BLUES INC<br>P. O. BOX 18<br>COLMAR, PA 18915   | N/A  | PC                                   | VETERINARIAN EXPENSES<br>FOR SPAY/NEUTER/SICK<br>CATS WHILE THEY ARE IN<br>THE CARE OF VOLUNTEER<br>FOSTERS | 2,500.  |
| STRONG LITTLE SOULS, INC.<br>113 ELAINE DR.<br>PITTSFIELD, MA 01201   | N/A  | PC                                   | GRANT WISHES FOR<br>CHILDREN BATTLING<br>CANCER   | 5,000.  |
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| SUNRISE THERAPEUTIC RIDING CENTER<br>2670 MINNEMAN RD.<br>RICHMOND, IN 47374                           | N/A  | PC                                   | REPLENISH THE<br>SCHOLARSHIP PROGRAM<br>FUND TO FINANCIALLY<br>ASSIST RIDERS WHO<br>RECEIVE SHARPLY                         | 4,000.  |
| SUNSHINE FOUNDATION<br>101 LAKESIDE PARK<br>SOUTHAMPTON, PA 18966                                      | N/A  | PC                                   | DEVELOP A WEB BASED<br>APP TO STREAMLINE<br>PROGRAM SERVICES  | 5,000.  |
| SUWANNEE VALLEY HUMANE SOCIETY<br>1156 SE BISBEE LOOP<br>LEE, FL 32059                                 | N/A  | PC                                   | EXPAND AND REMODEL<br>ANIMAL SHELTER<br>FACILITY  | 2,000.  |
| TEAM JACK FOUNDATION<br>47460 E. HWY 20, SUITE 2 PO BOX 607<br>ATKINSON, NE 68713                      | N/A  | PC                                   | FUND CHILDHOOD BRAIN<br>CANCER RESEARCH   | 2,000.  |
| TERRE HAUTE HUMANE SOCIETY<br>1811 S. FRUITRIDGE AVE.<br>TERRE HAUTE, IN 47803                         | N/A  | PC                                   | REBUILD AND REPAIR<br>COSTS FROM A STORM  | 6,000.  |
| THE ALL THINGS APPLE FOUNDATION<br>7306 AL HIGHWAY 41<br>SARDIS, AL 36775                              | N/A  | PC                                   | GENERAL OPERATING<br>SUPPORT  | 2,000.  |
| THE ARC SUSQUEHANNA VALLEY<br>PO BOX 892<br>SUNBURY, PA 17801  | N/A  | PC                                   | INTELLECTUAL/DEVELOPME<br>PROMOTE AWARENESS,<br>OPPORTUNITIES, QUALITY<br>PROGRAMS, & ADVOCACY<br>FOR INDIVIDUALS WITH<br>N | 2,000.  |
| THE BRANCHES OUTREACH<br>201 HIRST AVE.<br>RIO GRANDE, NJ 08242  | N/A  | PC                                   | COVER UTLITIES AND<br>RENT FOR BUILDING USED<br>AS A WARMING CENTER<br>FOR THE UNHOUSED                                     | 2,000.  |
| THE BURTON AND PHYLLIS HOFFMAN<br>FOUNDATION, INC.<br>700 CONNECTICUT BLVD.<br>EAST HARTFORD, CT 06108 | N/A  | PF                                   | PROVIDE MEALS TO LOW<br>INCOME FAMILIES DURING<br>THE HOLIDAYS  | 10,000. |
| <b>Total from continuation sheets</b>  |  |                                      |   |         |

**Part XIV** Supplementary Information

**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient<br>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 CARING CUPBOARD<br>131 NORTH RAILROAD STREET<br>PALMYRA, PA 17078   | N/A   | PC                             | SUPPORT OF CHILDREN'S PROGRAMMING, INCLUDING DIAPERS, WIPES AND FOOD                                       | 2,000.  |
| THE CENTER FOR WOMEN AND FAMILIES, INC.<br>1301 AKERS AVENUE<br>JEFFERSONVILLE, IN 47130  | N/A   | PC                             | SUPPORT OF A MOBILE ADVOCACY PROGRAM FOR SURVIVORS OF DOMESTIC VIOLENCE                                    | 2,000.  |
| THE CHRISTIAN CENTER RESCUE MISSION<br>625 MAIN STREET<br>ANDERSON, IN 46016  | N/A   | PC                             | FUNDING FOR LAUNDRY & PROVIDE OVER SHOWERS, FREE OF CHARGE TO OUR COMMUNITY'S HOMELESS & POOREST NEIGHBORS | 3,250.  |
| THE COURAGEOUS STEPS PROJECT<br>P.O. BOX 1<br>STILLWATER, ME 04489  | N/A   | PC                             | UPGRADE SENSORY TECHNOLOGY EQUIPMENT FOR GREENHOUSE VILLAGE PRE-SCHOOL                                     | 10,000. |
| THE CRISIS DOCTOR AND ASSOCIATES; DBA ALABAMA LAW ENFORCEMENT ALLIANCE FOR PEER SUPPORT (ALL<br>1450 ROSS CLARK CIRCLE, SUITE 3<br>DOTHAN, AL 36301 | N/A   | PC                             | TRAINING EQUIPPING EMERGENCY RESPONDERS WITH THE SKILLS NEEDED TO MAKE AN INTERVENTION WITH A              | 8,000.  |
| THE FAMILY EFFECT<br>1400 CLEVELAND STREET<br>GREENVILLE, SC 29607  | N/A   | PC                             | FUNDING FOR A COMMUNITY ROOM AT A RESIDENTIAL ADDICTION TREATMENT CENTER FOR PREGNANT WOMEN, YOUNG         | 5,000.  |
| THE FATHER'S HOUSE OF BALTIMORE<br>4805 NELSON AVE.<br>BALTIMORE, MD 21215  | N/A   | PC                             | PROVIDE RESOURCES TO CHILDREN OF INCARCERATED INDIVIDUALS DURING THE HOLIDAY SEASON                        | 2,000.  |
| THE GRAY HOUSE, INC.<br>22 SHELDON STREET<br>SPRINGFIELD, MA 01107  | N/A   | PC                             | REPLACE THE FLOORING IN A FOOD PANTRY  | 10,000. |
| THE GRAY HOUSE, INC.<br>22 SHELDON STREET<br>SPRINGFIELD, MA 01107  | N/A   | PC                             | REPLACE CARTS UTILIZED EACH WEEK DURING EMERGENCY FOOD DISTRIBUTION PROGRAM                                | 2,500.  |
| THE HARBOR CHURCH OF THE NAZARENE<br>AKA THE HARBOR<br>PO BOX 625, 55 W. KING ST.<br>SHIPPENSBURG, PA 17257-1224                                    | N/A   | PC                             | PROVIDE EXTERIOR IMPROVEMENTS TO A RECOVERY HOUSE FOR MEN  | 10,000. |
| <b>Total from continuation sheets</b>   |   |                                |  |         |

**Part XIV** Supplementary Information

**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient<br>Name and address (home or business)  | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution  | Amount  |
|---|--|--------------------------------------|--|---------|
| THE HAVEN OF NORTHEAST ARKANSAS<br>PO BOX 1062<br>BLYTHEVILLE, AR 72316   | N/A  | PC                                   | MAKE UPGRADES AND<br>MODIFICATIONS TO THE<br>TRANSITIONAL HOUSING<br>UNIT AT A DOMESTIC<br>VIOLENCE SHELTER        | 1,000.  |
| THE NEXT DOOR, INC.<br>965 TUCKER RD.<br>HOOD RIVER, OR 97031   | N/A  | PC                                   | SUPPORT OF A<br>THERAPEUTIC MUSIC<br>PROGRAM FOR AT-RISK<br>YOUTH  | 2,000.  |
| THE ROSE OF SHARON<br>723 ARCADIA CIRCLE<br>HUNTSVILLE, AL 35801  | N/A  | PC                                   | GENERAL PROGRAM<br>SUPPORT   | 2,000.  |
| THE SALVATION ARMY<br>320 W. 2ND STREET<br>BERWICK, PA 18603  | N/A  | PC                                   | IMPROVE PROGRAMS FOR<br>INDIVIDUALS & FAMILIES<br>IN NEED THROUGH THE<br>PURCHASE OF EQUIPMENT<br>AND A COMPUTER   | 2,000.  |
| THE SANCTUARY AT HAASFSVILLE<br>901 NESTLE WAY<br>BREINIGSVILLE, PA 18031   | N/A  | PC                                   | GENERAL PROGRAM<br>SUPPORT   | 5,000.  |
| THE TEARS FOUNDATION<br>1303 NARANJO DR.<br>GEORGETOWN, TX 78628  | N/A  | PC                                   | LIFT A FINANCIAL<br>BURDEN FROM FAMILIES<br>WHO HAVE LOST A CHILD<br>BY PROVIDING FUNDS TO<br>ASSIST WITH THE COST | 2,500.  |
| THOMPSON ECUMENICAL EMPOWERMENT<br>GROUP, INC. (TEEG)<br>15 THATCHER ROAD, PO BOX 664<br>N. GROSVENORDALE, CT 06255 | N/A  | PC                                   | GENERAL SUPPORT FOR A<br>PROGRAM FOCUSED ON<br>FAMILY  | 3,200.  |
| THOMPSON PUBLIC SCHOOLS<br>785 RIVERSIDE DRIVE<br>NORTH GROSVENORDALE, CT 06255                                     | N/A  | GOV                                  | SUPPORT OF MUCH NEEDED<br>REPAIRS TO A SCHOOL<br>PLAYGROUND  | 10,000. |
| TOYS FOR TOTS<br>48 MT PLEASANT ST<br>BIDDEFORD, ME 04005   | N/A  | PC                                   | PURCHASE TOYS FOR THE<br>HOLIDAYS FOR CHILDREN<br>IN NEED  | 5,000.  |
| TREES INC.<br>PO BOX 3683<br>TERRE HAUTE, IN 47803  | N/A  | PC                                   | REFURBISH A<br>SUBDIVISION WHICH WAS<br>DEVASTATED BY THE<br>EMERALD ASH BORER                                     | 2,000.  |
| <b>Total from continuation sheets</b>   |  |                                      |  |         |

**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient<br>Name and address (home or business)                                       | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution   | Amount  |
|--|--|--------------------------------------|---|---------|
| TRI STATE FAMILY CHRISTIAN CENTER INC<br>PO BOX 3113<br>PORT JERVIS, NY 12771          | N/A  | PC                                   | PURCHASE MERCHANDISE<br>THAT WOULD END UP IN A<br>DUMP YARD & GIVE THIS<br>MERCHANDISE TO NEEDED<br>FAMILIES IN THE LOCAL | 7,500.  |
| TURNING POINT DOMESTIC VIOLENCE<br>SERVICES<br>PO BOX 103<br>COLUMBUS, IN 47202        | N/A  | PC                                   | PROVIDE PRIMARY<br>PREVENTION EDUCATION<br>AND PROGRAMMING  | 10,000. |
| UNITY BAPTIST CHURCH<br>7500 TIREMAN<br>DETROIT, MI 48204                              | N/A  | PC                                   | LOW INCOME ASSISTANCE<br>TO FAMILIES TO<br>INCREASE ADVANCEMENT<br>IN SCHOOL  | 2,500.  |
| VALLEY BAPTIST CHURCH OF NORTHWEST<br>INDIANA<br>255 RIGG ROAD<br>VALPARAISO, IN 46383 | N/A  | PC                                   | INSTALL 2 PLAYGROUND<br>SETS AT A LOCAL CHURCH  | 10,000. |
| VETERANS OF FOREIGN WARS<br>800 WEST ASH STREET<br>PERRY, FL 32347                     | N/A  | PC                                   | REPAIR THE HOME OF A<br>VETERAN   | 2,000.  |
| VETERANS' OUTREACH<br>7 BELGRADE AVENUE<br>YOUNGSTOWN, OH 44505                        | N/A  | PC                                   | PAY FOR HOME REPAIRS<br>FOR VETERANS  | 2,000.  |
| VETERANS' OUTREACH<br>7 BELGRADE AVENUE<br>YOUNGSTOWN, OH 44505                        | N/A  | PC                                   | PURCHASE HAMS TO<br>DISTRIBUTE TO VETERAN<br>FAMILIES DURING THE<br>HOLIDAYS  | 2,500.  |
| VILLAGE OF SANDOVAL<br>102 N. CHERRY<br>SANDOVAL, IL 62882                             | N/A  | GOV                                  | CREATE A<br>COMPUTER/STUDY LAB FOR<br>COMMUNITY LIBRARY   | 5,000.  |
| WATERBOYZ FOR JESUS<br>7138 PROCLAMATION PL.<br>FREDERICK, MD 21703                    | N/A  | PC                                   | FUNDS FOR<br>TRANSPORTATION, FOOD,<br>AND OTHER ESSENTIALS<br>AT A PROGRAM FOR<br>STRUGGLING MEN                          | 2,000.  |
| WATERFORD COUNTRY SCHOOL<br>78 HUNTS BROOK ROAD<br>QUAKER HILL, CT 06375               | N/A  | PC                                   | PURCHASE SENSORY<br>PLAYGROUND EQUIPMENT<br>FOR SCHOOL AND CAMP   | 10,000. |
| <b>Total from continuation sheets</b>  |  |                                      |   |         |

**Part XIV** Supplementary Information

**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient<br>Name and address (home or business)   | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution   | Amount  |
|--|--|--------------------------------------|---|---------|
| WATERFORD COUNTRY SCHOOL<br>78 HUNTS BROOK ROAD<br>QUAKER HILL, CT 06375   | N/A  | PC                                   | GENERAL PROGRAM<br>SUPPORT  | 20,000. |
| WE HEART BERLIN INC<br>302 BAY ST.<br>BERLIN, MD 21811   | N/A  | PC                                   | SUPPORT TO LIGHT<br>BASKETBALL COURTS IN A<br>COMMUNITY PARK  | 10,000. |
| WELLNESS HOUSE<br>131 N. COUNTY LINE ROAD<br>HINSDALE, IL 60521  | N/A  | PC                                   | GENERAL SUPPORT   | 2,000.  |
| WEYMOUTH COUNCIL FOR THE HUNGRY, INC.<br>D/B/A SOUTH SHORE FOOD BANK<br>40E RESERVOIR PARK DRIVE<br>ROCKLAND, MA 02370 | N/A  | PC                                   | PURCHASE FRESH FRUITS<br>AND VEGETABLES FOR<br>DISTRIBUTION TO FOOD<br>PANTRIES AND COVER<br>TRANSPORTATION COSTS | 2,000.  |
| WHITESTONE LIFE CENTER INC<br>64 ASHAWAY ROAD<br>WESTERLY, RI 02891  | N/A  | PC                                   | GENERAL OPERATING<br>SUPPORT  | 2,000.  |
| WHITESTONE LIFE CENTER INC.<br>1373 SMITH STREET<br>NORTH PROVIDENCE, RI 02911   | N/A  | PC                                   | NEW GROUP ROOM, NEW<br>FURNITURE, KITCHEN<br>APPLIANCES, &<br>ADDITIONAL BEDROOMS TO<br>ACCOMMODATE MORE          | 10,000. |
| WIZARD OF PAWS WILDLIFE EDUCATION INC<br>403 FLETCHER LN.<br>BEECH GROVE, IN 46107                                     | N/A  | PC                                   | BUILD NEW ENCLOSURES<br>TO EXPAND THE LIVING<br>SPACE FOR ANIMALS   | 2,000.  |
| WOMEN AWARE, INC.<br>250 LIVINGSTON AVE.<br>NEW BRUNSWICK, NJ 08901  | N/A  | PC                                   | PROVIDE DIRECT<br>ASSISTANCE IN THE FORM<br>OF GIFT CARDS TO<br>SURVIVORS SHELTERING<br>IN HOTEL PLACEMENT        | 1,000.  |
| WOMEN'S CRISIS SUPPORT TEAM<br>560A NORTHEAST F STREET, #430<br>GRANTS PASS, OR 97526                                  | N/A  | PC                                   | REPLACE AND UPGRADE<br>SECURITY SYSTEM  | 3,000.  |
| WOMEN'S CRISIS SUPPORT TEAM<br>612 NW 5TH STREET<br>GRANTS PASS, OR 97526  | N/A  | PC                                   | GENERAL PROGRAM<br>SUPPORT  | 2,000.  |
| <b>Total from continuation sheets</b>  |  |                                      |   |         |

**Part XIV** Supplementary Information

**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient<br>Name and address (home or business)   | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution  | Amount  |
|--|--|--------------------------------------|--|---------|
| WOODLANDS WILDLIFE REFUGE<br>676 COUNTY ROAD 513<br>PITTSBURY, NJ 08867                                | N/A  | PC                                   | PURCHASE A NEW ANIMAL<br>ENCLOSURE AND DIRECT<br>CARE SUPPLIES   | 6,000.  |
| Y&E, INC.<br>1308 VANN AVE<br>EVANSVILLE, IN 47714   | N/A  | PC                                   | FUND VARIOUS LEARNING<br>PROGRAMS AND<br>FOOD/MEALS  | 2,000.  |
| YIT FOUNDATION<br>924 HOMESTEAD AVE.<br>MAYBROOK, NY 12543   | N/A  | PC                                   | TRANSPORTATION NEEDS<br>OF VETERANS  | 3,000.  |
| YORKTOWN LOVE IN ACTION<br>1736 FRONT STREET<br>YORKTOWN HEIGHTS, NY 10598                             | N/A  | PC                                   | PURCHASE HEATING OIL<br>AND WOOD FOR LOW<br>INCOME FAMILIES TO USE<br>DURING THE WINTER                        | 2,500.  |
| YOU EAT I EAT COMMUNITY UNITY FOOD<br>PANTRY CORP<br>8888 DYER STREET<br>EL PASO, TX 79904             | N/A  | PC                                   | SUPPORT OF<br>MISCELLANEOUS PROGRAM<br>NEEDS - RENT,<br>UTILITIES, FOOD AND<br>HOLIDAY GIVING                  | 1,400.  |
| YOU EAT I EAT COMMUNITY UNITY FOOD<br>PANTRY CORP<br>8888 DYER STREET, SUITE #513<br>EL PASO, TX 79904 | N/A  | PC                                   | SUPPORT OF PROGRAM<br>EXPENSES INCLUDING<br>RENT, UTILITIES, FOOD<br>AND HOLIDAY EVENT AT A<br>FOOD PANTRY     | 2,000.  |
| YOU EAT I EAT UNITY COMMUNITY FOOD<br>PANTRY<br>8888 DYER. ST. STE., 513<br>EL PASO, TX 79904          | N/A  | PC                                   | GENERAL PROGRAM<br>SUPPORT   | 2,000.  |
| YOUNG EINSTEINS LEARNING ACADEMY PTO<br>1820 LAKE SHORE DRIVE<br>ROMEDEVILLE, IL 60446                 | N/A  | PC                                   | PURCHASE COMPUTERS AND<br>SITTING AREA   | 1,000.  |
| YWCA DAYTON<br>141 W. THIRD ST.<br>DAYTON, OH 45402  | N/A  | PC                                   | PROVIDE A FIRE PANEL<br>FOR A DOMESTIC<br>VIOLENCE TRANSITIONAL<br>HOUSING UNIT                                | 10,000. |
| YWCA NORTHEAST INDIANA<br>5920 DECATUR ROAD<br>FORT WAYNE, IN 46816                                    | N/A  | PC                                   | PROVIDE FLEXIBLE<br>FUNDING FOR CLIENTS<br>EXPERIENCING DOMESTIC<br>VIOLENCE TO ADDRESS<br>BARRIERS TO SUCCESS | 2,000.  |
| <b>Total from continuation sheets</b>  |  |                                      |  |         |



**Part XIV** Supplementary Information

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

NAME OF RECIPIENT - BERKSHIRE HELPING HANDS, INC.  
FOOD, TOILETRIES, SUPPLEMENTAL EMERGENCY HEAT OR UTILITIES AND  
ASSISTANCE WITH GETTING BASIC NECESSITIES FOR THOSE IN NEED

NAME OF RECIPIENT - BOYS FARM INC.  
EDUCATIONAL FIELD TRIPS, INCENTIVES & ACADEMIC SUCCESS REWARDS TO  
ENCOURAGE STUDENTS TO SUCCEED IN THEIR ACADEMICS

NAME OF RECIPIENT - CHARITABLE ALLIES, INC  
FUNDING FOR PHONE, TELECONFERENCE & IN-PERSON LEGAL CONSULTATIONS BY  
ATTORNEYS FOR OTHER NFP

NAME OF RECIPIENT - COBURN PLACE  
REPAIRS TO CHILDREN'S OUTDOOR SPACE & PURCHASE GAS CARDS FOR SURVIVORS  
AT A DOMESTIC VIOLENCE PROGRAM

NAME OF RECIPIENT - COCKTAILS & CAREGIVERS  
SUPPORT ONE MONTH OF CHILD CARE NEEDS/SUBSIDIZE CARE FOR THE HOME FOR  
FAMILIES GOING THROUGH CHEMOTHERAPY

NAME OF RECIPIENT - GRAHAMTASTIC CONNECTION  
PURCHASE TECHNOLOGY FOR CHILDREN WITH CANCER & OTHER ILLNESSES TO  
SUPPORT THEIR EDUCATION, SOCIAL AND EMOTIONAL WELL-BEING

NAME OF RECIPIENT - GROWING FUTURES EARLY EDUCATION CENTER  
RENOVATE CLASSROOM FOR A HEAD START THAT PROVIDES IMPROVED LEARNING  
ENVIRONMENTS FOR VULNERABLE CHILDREN

**Part XIV** Supplementary Information

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

NAME OF RECIPIENT - ISABELLE ACADEMY OF FILM & CREATIVE ARTS  
HANDS-ON APPLICATION OF KNOWLEDGE, EDUCATION AND CREATIVITY TO THE  
OVERALL WELL-BEING OF OUR YOUTH & COMMUNITY

NAME OF RECIPIENT - ISLAMIC ASSOCIATION OF ERIE  
PROVIDE A TECHNOLOGY ROOM/COMPUTERS FOR FAMILIES OF LOW INCOME THAT  
NEED ASSISTANCE & CHILDREN LEARNING ACTIVITIES

NAME OF RECIPIENT - JXN HARM REDUCTION  
PURCHASE SUPPLIES SUCH AS SYRINGES, COTTON BALLS, STERILE WATER, ETC.  
THAT ARE CRITICAL TO THE OPERATIONS THEIR PROGRAM.

NAME OF RECIPIENT - LEAD WITH LOVE CORPORATION  
TRANSFORM A VACANT LOT INTO A COMMUNITY GARDEN & WELLNESS CENTER FOR  
THOSE WHO HAVE EXPERIENCED TRAUMA DUE TO GUN VIOLENCE

NAME OF RECIPIENT - LEBANON COUNTY CHRISTIAN MINISTRIES  
PROVIDE FINANCIAL SUPPORT TO PARTIALLY FUND THE SUPPLIES TO ENSURE  
THOSE NEEDING A MEAL ARE ABLE TO RECEIVE ONE

NAME OF RECIPIENT - LIFECONNECTIONS SPECIALIZED SUPPORT SERVICES  
PURCHASE RECREATIONAL EQUIPMENT, TECHNOLOGY AND SENSORY EQUIPMENT FOR  
INDIVIDUALS WITH INTELLECTUAL & DEVELOPMENTAL DISABILITIES

NAME OF RECIPIENT - LITTLE RED DOOR CANCER AGENCY  
PROVIDE FREE TRANSPORTATION ASSISTANCE TO LOW-INCOME AND MEDICALLY  
UNDERSERVED CANCER PATIENTS

**Part XIV** Supplementary Information

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

NAME OF RECIPIENT - MAKE WAY FOR BOOKS

ENSURE YOUNG CHILDREN HAVE QUALITY EARLY LITERACY & LEARNING

OPPORTUNITIES THAT PREPARE THEM TO THRIVE IN SCHOOL & BEYOND

NAME OF RECIPIENT - MENTORSTARK

RECRUIT, BACKGROUND CHECK AND TRAIN 100 LOCAL MENTORS REPRESENTING A

VARIETY OF CAREERS & INDUSTRIES

NAME OF RECIPIENT - NEPA YOUTH SHELTER

PROVIDE FUNDING FOR YOUNG PEOPLE IN NORTHEASTERN PENNSYLVANIA

EXPERIENCING HOMELESSNESS FOR UP TO ONE YEAR

NAME OF RECIPIENT - OKEECHOBEE FRATERNAL ORDER OF POLICE ASSOCIATES,

LODGE 69, INC.

PROMOTE POSITIVE INTERACTION BETWEEN LAW ENFORCEMENT OFFICERS, THEIR

FAMILIES AND THE COMMUNITY

NAME OF RECIPIENT - RALLY 2 GIVE

TRANSPORTATION COSTS FOR A NONPROFIT WHO GIVES SNOWBOARDING LESSONS &

MENTORING SUPPORT TO THOSE IN NEED

NAME OF RECIPIENT - SUNRISE THERAPEUTIC RIDING CENTER

REPLENISH THE SCHOLARSHIP PROGRAM FUND TO FINANCIALLY ASSIST RIDERS WHO

RECEIVE SHARPLY DISCOUNTED SERVICES

NAME OF RECIPIENT - THE ARC SUSQUEHANNA VALLEY

PROMOTE AWARENESS, OPPORTUNITIES, QUALITY PROGRAMS, & ADVOCACY FOR

INDIVIDUALS WITH INTELLECTUAL/DEVELOPMENTAL DISABILITIES

Part XIV Supplementary Information

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

NAME OF RECIPIENT - THE CRISIS DOCTOR AND ASSOCIATES; DBA ALABAMA LAW ENFORCEMENT ALLIANCE FOR P TRAINING EQUIPPING EMERGENCY RESPONDERS WITH THE SKILLS NEEDED TO MAKE AN INTERVENTION WITH A PEER

NAME OF RECIPIENT - THE FAMILY EFFECT FUNDING FOR A COMMUNITY ROOM AT A RESIDENTIAL ADDICTION TREATMENT CENTER FOR PREGNANT WOMEN, YOUNG MOTHERS & THEIR CHILDREN

NAME OF RECIPIENT - THE TEARS FOUNDATION LIFT A FINANCIAL BURDEN FROM FAMILIES WHO HAVE LOST A CHILD BY PROVIDING FUNDS TO ASSIST WITH THE COST OF BURIAL/CREMATION

NAME OF RECIPIENT - TRI STATE FAMILY CHRISTIAN CENTER INC PURCHASE MERCHANDISE THAT WOULD END UP IN A DUMP YARD & GIVE THIS MERCHANDISE TO NEEDED FAMILIES IN THE LOCAL COMMUNITY

NAME OF RECIPIENT - WHITESTONE LIFE CENTER INC. NEW GROUP ROOM, NEW FURNITURE, KITCHEN APPLIANCES, & ADDITIONAL BEDROOMS TO ACCOMMODATE MORE CLIENTS

**Schedule B**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

Attach to Form 990 or Form 990-PF.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2022**

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), 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), 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).

|   |   |
|---|---|
| Name of organization<br><br><b>ROUND ROOM GIVES, INC.</b> | Employer identification number<br><br><b>84-4783133</b> |
|---|---|

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c)<br>Total contributions | (d)<br>Type of contribution   |
|------------|---|----------------------------|---|
| 1          | THE CELLULAR CONNECTION<br><br>10300 KINCAID DRIVE SUITE 100<br><br>FISHERS, IN 46037 | \$ 1,779,972.              | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.) |
| 2          | WIRELESS ZONE<br><br>10300 KINCAID DRIVE SUITE 100<br><br>FISHERS, IN 46037           | \$ 989,066.                | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.) |
| _____      | _____<br><br>_____<br><br>_____   | \$ _____                   | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.)            |
| _____      | _____<br><br>_____<br><br>_____   | \$ _____                   | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.)            |
| _____      | _____<br><br>_____<br><br>_____   | \$ _____                   | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.)            |
| _____      | _____<br><br>_____<br><br>_____   | \$ _____                   | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.)            |

|   |   |
|---|---|
| Name of organization<br><br><b>ROUND ROOM GIVES, INC.</b> | Employer identification number<br><br><b>84-4783133</b> |
|---|---|

**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

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

|   |   |
|---|---|
| Name of organization<br><br><b>ROUND ROOM GIVES, INC.</b> | Employer identification number<br><br><b>84-4783133</b> |
|---|---|

**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 |
|---|---------------------|--|-------------------------------------|
|   |                     |  |                                     |
| <b>(e) Transfer of gift</b>             |                     |  |                                     |
| 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 |
|   |                     |  |                                     |
| <b>(e) Transfer of gift</b>             |                     |  |                                     |
| 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 |
|   |                     |  |                                     |
| <b>(e) Transfer of gift</b>             |                     |  |                                     |
| 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 |
|   |                     |  |                                     |
| <b>(e) Transfer of gift</b>             |                     |  |                                     |
| Transferee's name, address, and ZIP + 4 |                     | Relationship of transferor to transferee |                                     |
|   |                     |  |                                     |

| FORM 990-PF                                  | OTHER INCOME                |                                   | STATEMENT 1                   |
|--|-----------------------------|-----------------------------------|-------------------------------|
| DESCRIPTION                                  | (A)<br>REVENUE<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME |
| GROSS INCOME FROM SPECIAL FUNDRAISING EVENTS | 56,431.                     | 0.                                |                               |
| TOTAL TO FORM 990-PF, PART I, LINE 11        | 56,431.                     | 0.                                |                               |

| FORM 990-PF                  | ACCOUNTING FEES              |                                   |                               | STATEMENT 2                   |
|------------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| DESCRIPTION                  | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
| ACCOUNTING FEES              | 5,112.                       | 0.                                |                               | 0.                            |
| TO FORM 990-PF, PG 1, LN 16B | 5,112.                       | 0.                                |                               | 0.                            |

| FORM 990-PF                  | OTHER PROFESSIONAL FEES      |                                   |                               | STATEMENT 3                   |
|------------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| DESCRIPTION                  | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
| PROFESSIONAL FEES            | 5,681.                       | 0.                                |                               | 0.                            |
| TO FORM 990-PF, PG 1, LN 16C | 5,681.                       | 0.                                |                               | 0.                            |

| FORM 990-PF                 | OTHER EXPENSES               |                                   |                               | STATEMENT 4                   |
|-----------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| DESCRIPTION                 | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
| OFFICE SUPPLIES             | 4,113.                       | 0.                                |                               | 0.                            |
| BANK FEES                   | 4,640.                       | 0.                                |                               | 0.                            |
| PROPERTY INSURANCE          | 1,500.                       | 0.                                |                               | 0.                            |
| POSTAGE                     | 1,850.                       | 0.                                |                               | 0.                            |
| SPECIAL EVENT EXPENSES      | 37,014.                      | 0.                                |                               | 0.                            |
| TO FORM 990-PF, PG 1, LN 23 | 49,117.                      | 0.                                |                               | 0.                            |

FORM 990-PF

OTHER LIABILITIES

STATEMENT 5

DESCRIPTION

BOY AMOUNT

EOY AMOUNT

RELATED PARTY PAYABLE

829.

47,320.

TOTAL TO FORM 990-PF, PART II, LINE 22

829.

47,320.

GRANTEE'S NAME

DO MORE FOUNDATION

GRANTEE'S ADDRESS

923 STRAFFORD ST.  
BETHLEHEM, PA 18018

| <u>GRANT AMOUNT</u> | <u>DATE OF GRANT</u> | <u>AMOUNT EXPENDED</u> |
|---------------------|----------------------|------------------------|
| 2,500.              | 02/24/22             | 2,500.                 |

PURPOSE OF GRANT

PURCHASE TOYS FOR CHRISTMAS GIVEAWAY

DATES OF REPORTS BY GRANTEE

10/18/23

ANY DIVERSION BY GRANTEE

NONE

GRANTEE'S NAME

MADISON LION'S CLUB

GRANTEE'S ADDRESS

PO BOX 2  
MADISON, FL 32341

| <u>GRANT AMOUNT</u> | <u>DATE OF GRANT</u> | <u>AMOUNT EXPENDED</u> |
|---------------------|----------------------|------------------------|
| 5,000.              | 12/31/22             | 5,000.                 |

PURPOSE OF GRANT

PURCHASE FOOD FOR LOCAL FAMILIES NEEDING ASSISTANCE

DATES OF REPORTS BY GRANTEE

10/06/23

ANY DIVERSION BY GRANTEE

NONE

GRANTEE'S NAME

SCHOOL OF THE CREATIVES

GRANTEE'S ADDRESS

9960 SHOSHONE WAY  
RANDALLSTOWN, MD 21133

| <u>GRANT AMOUNT</u> | <u>DATE OF GRANT</u> | <u>AMOUNT EXPENDED</u> |
|---------------------|----------------------|------------------------|
| 2,000.              | 02/24/22             | 2,000.                 |

PURPOSE OF GRANT

LEASE A BUILDING IN COMMUNITY TO HELP YOUTH FROM AGES 9-15 WITH AN AFTER SCHOOL PROGRAM AND CAMP

DATES OF REPORTS BY GRANTEE

10/24/23

ANY DIVERSION BY GRANTEE

NONE

GRANTEE'S NAME

THE ALL THINGS APPLE FOUNDATION

GRANTEE'S ADDRESS

7306 AL HIGHWAY 41  
SARDIS, AL 36775

| <u>GRANT AMOUNT</u> | <u>DATE OF GRANT</u> | <u>AMOUNT EXPENDED</u> |
|---------------------|----------------------|------------------------|
| 2,000.              | 02/24/22             | 2,000.                 |

PURPOSE OF GRANT

SUPPORT MISSION TO AID IN THE RELIEF OF ISSUES AND CAUSES LEADING TO THE DEVELOPMENT OF DEPRESSION

DATES OF REPORTS BY GRANTEE

10/16/23

ANY DIVERSION BY GRANTEE

NONE

GRANTEE'S NAME

FEEDING TINY TUMMIES

GRANTEE'S ADDRESS

305 PARK AVE.  
KEENE, NH 03431

| <u>GRANT AMOUNT</u> | <u>DATE OF GRANT</u> | <u>AMOUNT EXPENDED</u> |
|---------------------|----------------------|------------------------|
| 3,000.              | 06/01/22             | 3,000.                 |

PURPOSE OF GRANT

FILL GAPS FOR NUTRITIOUS FOOD FOR KIDS AT HOME AND CAMPS DURING THE SUMMER,  
EXPENDITURE RESPONSIBILITY RECEIVED

DATES OF REPORTS BY GRANTEE

06/06/23

ANY DIVERSION BY GRANTEE

NONE

GRANTEE'S NAME

THE BURTON AND PHYLLIS HOFFMAN FOUNDATION, INC.

GRANTEE'S ADDRESS

700 CONNECTICUT BLVD.  
EAST HARTFORD, CT 06108

| <u>GRANT AMOUNT</u> | <u>DATE OF GRANT</u> | <u>AMOUNT EXPENDED</u> |
|---------------------|----------------------|------------------------|
| 10,000.             | 06/01/22             | 10,000.                |

PURPOSE OF GRANT

PROVIDE MEALS TO LOW INCOME FAMILIES DURING THE HOLIDAYS

DATES OF REPORTS BY GRANTEE

06/06/23

ANY DIVERSION BY GRANTEE

NONE

GRANTEE'S NAME

DOUGLAS PARK PROJECT

GRANTEE'S ADDRESS

P.O. BOX 757  
DOUGLAS, MI 49406

| <u>GRANT AMOUNT</u> | <u>DATE OF GRANT</u> | <u>AMOUNT EXPENDED</u> |
|---------------------|----------------------|------------------------|
| 2,500.              | 10/01/22             | 2,500.                 |

PURPOSE OF GRANT

PURCHASE PLAYGROUND EQUIPMENT FOR COMMUNITY PARK, EXPENDITURE RESPONSIBILITY RECEIVED

DATES OF REPORTS BY GRANTEE

06/06/23

ANY DIVERSION BY GRANTEE

NONE

GRANTEE'S NAME

RALLY 2 GIVE

GRANTEE'S ADDRESS

32 LOWELL RD.  
CONCORD, MA 01742

| <u>GRANT AMOUNT</u> | <u>DATE OF GRANT</u> | <u>AMOUNT EXPENDED</u> |
|---------------------|----------------------|------------------------|
| 10,000.             | 12/31/22             | 10,000.                |

PURPOSE OF GRANT

SUPPORT THE TRANSPORTATION COSTS FOR A NONPROFIT WHO GIVES SNOWBOARDING LESSONS, IN CONJUNCTION WITH MENTORING SUPPORT TO THOSE IN NEED

DATES OF REPORTS BY GRANTEE

10/05/23

ANY DIVERSION BY GRANTEE

NONE

GRANTEE'S NAME

MAC A CHEEK LEARNING CENTER

GRANTEE'S ADDRESS

1130 WEST SANDUSKY AVE.  
BELLEFONTAINE, OH 43311

| <u>GRANT AMOUNT</u> | <u>DATE OF GRANT</u> | <u>AMOUNT EXPENDED</u> |
|---------------------|----------------------|------------------------|
| 2,000.              | 06/01/22             | 2,000.                 |

PURPOSE OF GRANT

PURCHASE ITEMS TO CREATE A REST AND RELAXATION AREA FOR TEACHERS

DATES OF REPORTS BY GRANTEE

10/05/23

ANY DIVERSION BY GRANTEE

NONE

GRANTEE'S NAME

VETERANS OF FOREIGN WARS

GRANTEE'S ADDRESS

800 WEST ASH STREET  
PERRY, FL 32347

| <u>GRANT AMOUNT</u> | <u>DATE OF GRANT</u> | <u>AMOUNT EXPENDED</u> |
|---------------------|----------------------|------------------------|
| 2,000.              | 09/01/22             | 2,000.                 |

PURPOSE OF GRANT

REPAIR THE HOME OF A VETERAN

DATES OF REPORTS BY GRANTEE

10/09/23

ANY DIVERSION BY GRANTEE

NONE

GRANTEE'S NAME

VILLAGE OF SANDOVAL

GRANTEE'S ADDRESS

102 N. CHERRY  
SANDOVAL, IL 62882

| <u>GRANT AMOUNT</u> | <u>DATE OF GRANT</u> | <u>AMOUNT EXPENDED</u> |
|---------------------|----------------------|------------------------|
| 5,000.              | 09/01/22             | 5,000.                 |

PURPOSE OF GRANT

CREATE A COMPUTER/STUDY LAB FOR COMMUNITY LIBRARY

DATES OF REPORTS BY GRANTEE

10/16/23

ANY DIVERSION BY GRANTEE

NONE

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

844-822-7625

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



NAME OF NONCHARITABLE EXEMPT ORGANIZATION

VILLAGE OF SANDOVAL

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

CREATE A COMPUTER/STUDY LAB FOR COMMUNITY LIBRARY

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

RALLY 2 GIVE

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

SUPPORT THE TRANSPORTATION COSTS FOR A NONPROFIT WHO GIVES SNOWBOARDING LESSONS, IN CONJUNCTION WITH MENTORING SUPPORT TO THOSE IN NEED

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

DOUGLAS PARK PROJECT

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

GENERAL PROGRAM SUPPORT

---

GENERAL EXPLANATION

STATEMENT 10

---

FORM/LINE IDENTIFIER

---

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

EXPLANATION:

PART VI-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)

# 2022

Department of the Treasury  
Internal Revenue Service

Go to [www.irs.gov/Form4720](http://www.irs.gov/Form4720) for instructions and the latest information.

For calendar year 2022 or other tax year beginning \_\_\_\_\_, 2022, and ending \_\_\_\_\_,

|  |  |
|--|--|
| Name of organization, entity, or person subject to tax<br><br><b>ROUND ROOM GIVES, INC.</b>  | EIN or SSN<br><b>84-4783133</b>  |
| Number, street, and room or suite no. (or P.O. box if mail is not delivered to street address)<br><b>10300 KINCAID DRIVE SUITE 203</b> | <input type="checkbox"/> Amended return  |
| City or town, state or province, country, and ZIP or foreign postal code<br><b>FISHERS, IN 46037</b>                                   | Check box for type of annual return:<br><input type="checkbox"/> Form 990 <input type="checkbox"/> Form 990-EZ<br><input checked="" type="checkbox"/> Form 990-PF <input type="checkbox"/> Other<br><input type="checkbox"/> Form 5227 |

|  |  | Yes | No       |
|--|--|-----|----------|
| <b>A</b> Is the organization a foreign private foundation within the meaning of section 4948(b)?   |  |     | <b>X</b> |
| Show conversion rate to U.S. dollars. See instructions   |  |     |          |
| <b>B</b> <b>Entity (other than the organization) or person subject to tax:</b> Are you required to file Form 4720 with respect to more than one organization in the current tax year? See instructions |  |     | <b>X</b> |

If "Yes," attach a list showing the name and EIN for each organization with respect to which you will file Form 4720 for the current tax year.

**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 (f)       | 3  |  |      |  |
| 4 Tax on taxable expenditures - Schedule E, Part I, column (h)                                 | 4  |  | 400. |  |
| 5 Tax on political expenditures - Schedule F, Part I, column (f)                               | 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 <b>Total</b> (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 <b>Total</b> - 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 <b>Tax due.</b> If line 1 is larger than line 2, enter amount owed (see instructions)           | 3 | 400. |
| 4 <b>Overpayment.</b> If line 1 is smaller than line 2, enter the difference. This is your refund | 4 |      |

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

| <b>Part I Acts of Self-Dealing and Tax Computation</b>   |                 |                      |                            |   |
|--|-----------------|----------------------|----------------------------|---|
| (a) Act number   | (b) Date of act | (c) Correction made? |                            | (d) Description of act  |
|  |                 | Yes                  | No                         |   |
| 1  |                 |                      |                            |   |
| 2  |                 |                      |                            |   |
| 3  |                 |                      |                            |   |
| 4  |                 |                      |                            |   |
| 5  |                 |                      |                            |   |
| (e) Question number from Form 990-PF, Part VII-B, or Form 5227, Part VIII, applicable to the act |                 |                      | (f) Amount involved in act | (g) Initial tax on self-dealer (10% of col. (f))                                      |
|  |                 |                      |                            | (h) Tax on foundation managers (if applicable) (lesser of \$20,000 or 5% of col. (f)) |
|  |                 |                      |                            |   |
|  |                 |                      |                            |   |
|  |                 |                      |                            |   |

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

| <b>Part III Summary of Tax Liability of Foundation Managers and Proration of Payments</b> |                                   |   |  |
|---|-----------------------------------|---|--|
| (a) Names of foundation managers liable for tax   | (b) Act 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 B - Initial Tax on Undistributed Income** (Section 4942)

|   |   |   |  |
|---|---|---|--|
| 1 | Undistributed income for years before 2021 (from Form 990-PF for 2022, Part XII, line 6d) .....   | 1 |  |
| 2 | Undistributed income for 2021 (from Form 990-PF for 2022, Part XII, line 6e) .....  | 2 |  |
| 3 | Total undistributed income at end of current tax year beginning in 2022 and subject to tax under section 4942 (add lines 1 and 2) ..... | 3 |  |
| 4 | <b>Tax</b> - 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)<br>Voting stock<br>(profits interest or<br>beneficial interest) | (b)<br>Value | (c)<br>Nonvoting stock<br>(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   |              |  |

|   |   |     |    |
|---|---|-----|----|
| 8 | Did the organization dispose of excess holdings subject to tax reported on line 6? Attach a statement explaining (i) corrective action taken, or (ii) why corrective action has not been taken. | Yes | No |
|---|---|-----|----|

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

**Part I Investments and Tax Computation**

| (a)<br>Investment number   | (b) Date of investment | (c) Correction made? |    | (d) Description of investment | (e) Amount of investment | (f) Initial tax on foundation (10% of col. (e)) | (g) Initial tax on foundation managers (if applicable) - (lesser of \$10,000 or 10% of col. (e)) |
|--|------------------------|----------------------|----|-------------------------------|--------------------------|---|--|
|  |                        | Yes                  | No |                               |                          |   |  |
| 1  |                        |                      |    |                               |                          |   |  |
| 2  |                        |                      |    |                               |                          |   |  |
| 3  |                        |                      |    |                               |                          |   |  |
| 4  |                        |                      |    |                               |                          |   |  |
| 5  |                        |                      |    |                               |                          |   |  |
| <b>Total</b> - Column (f). Enter here and on Part I, line 3  |                        |                      |    |                               |                          |   |  |
| <b>Total</b> - Column (g). 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. (g), 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)

| <b>Part I Expenditures and Computation of Tax</b>  |            |                           |                      |    |   |   |   |
|--|------------|---------------------------|----------------------|----|---|---|---|
| (a) Item number  | (b) Amount | (c) Date paid or incurred | (d) Correction made? |    | (e) Name and address of recipient   |   |   |
|  |            |                           | Yes                  | No |   |   |   |
| 1  |            |                           |                      |    |   |   |   |
| 2  |            |                           |                      |    |   |   |   |
| 3  |            |                           |                      |    |   |   |   |
| 4  |            |                           |                      |    |   |   |   |
| 5  |            |                           |                      |    | <b>SEE STATEMENT 2</b>  |   |   |
| (f) Description of expenditure and purposes for which made   |            |                           |                      |    | (g) Question number from Form 990-PF, Part VI-B, or Form 5227, Part VIII, applicable to the expenditure | (h) Initial tax imposed on foundation (20% of col. (b)) | (i) Initial tax imposed on foundation managers (if applicable) - (lesser of \$10,000 or 5% of col. (b)) |
|  |            |                           |                      |    |   |   |   |
|  |            |                           |                      |    |   |   |   |
|  |            |                           |                      |    |   |   |   |
|  |            |                           |                      |    |   |   |   |
| <b>Total</b> - Column (h). Enter here and on Part I, line 4  |            |                           |                      |    |   | <b>400.</b>   |   |
| <b>Total</b> - Column (i). Enter total (or prorated amount) here and in Part II, column (c), below |            |                           |                      |    |   |   |   |

| <b>Part II Summary of Tax Liability of Foundation Managers and Proration of Payments</b> |                                    |   |  |
|--|------------------------------------|---|--|
| (a) Names of foundation managers liable for tax  | (b) Item no. from Part I, col. (a) | (c) Tax from Part I, col. (i), 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)

| <b>Part I Expenditures and Computation of Tax</b>  |            |                           |                      |    |  |   |  |
|--|------------|---------------------------|----------------------|----|--|---|--|
| (a) Item number  | (b) Amount | (c) Date paid or incurred | (d) Correction made? |    | (e) Description of political expenditure | (f) Initial tax imposed on organization or foundation (10% of col. (b)) | (g) Initial tax imposed on managers (if applicable) (lesser of \$5,000 or 2½% of col. (b)) |
|  |            |                           | Yes                  | No |  |   |  |
| 1  |            |                           |                      |    |  |   |  |
| 2  |            |                           |                      |    |  |   |  |
| 3  |            |                           |                      |    |  |   |  |
| 4  |            |                           |                      |    |  |   |  |
| 5  |            |                           |                      |    |  |   |  |
| <b>Total</b> - Column (f). Enter here and on Part I, line 5  |            |                           |                      |    |  |   |  |
| <b>Total</b> - Column (g). Enter total (or prorated amount) here and in Part II, column (c), below |            |                           |                      |    |  |   |  |

| <b>Part II Summary of Tax Liability of Organization Managers or Foundation Managers and Proration of Payments</b> |                                    |   |  |
|---|------------------------------------|---|--|
| (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. (g), 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), 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), 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  |            |                           |  |  |   |
| <b>Total</b> - Column (e). Enter here and on Part I, line 7  |            |                           |  |  |   |
| <b>Total</b> - 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)) |
|   |                                    |   |  |
|   |                                    |   |  |
|   |                                    |   |  |
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|   |                                    |   |  |

**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) Correction made?   |    | (d) Description of transaction  |
|  |                         | Yes  | No |   |
| 1  |                         |  |    |   |
| 2  |                         |  |    |   |
| 3  |                         |  |    |   |
| 4  |                         |  |    |   |
| 5  |                         |  |    |   |
| <b>(e) Amount of excess benefit</b>                    |                         | <b>(f) Initial tax on disqualified persons (25% of col. (e))</b> |    | <b>(g) Tax on organization managers (if applicable) (lesser of \$20,000 or 10% of col. (e))</b> |
|  |                         |  |    |   |
|  |                         |  |    |   |
|  |                         |  |    |   |
|  |                         |  |    |   |

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

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

| <b>Part III Summary of Tax Liability of 501(c)(3), (c)(4) &amp; (c)(29) Organization Managers and Proration of Payments</b> |                                      |   |  |
|---|--------------------------------------|---|--|
| (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. (g), or prorated amount | (d) Manager's total tax liability (add amounts in col. (c)) (see instructions) |
|   |                                      |   |  |
|   |                                      |   |  |
|   |                                      |   |  |
|   |                                      |   |  |
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**SCHEDULE J - Taxes on Being a Party to Prohibited Tax Shelter Transactions** (Section 4965)

| <b>Part I Prohibited Tax Shelter Transactions (PTST) and Tax Imposed on the Tax-Exempt Entity</b><br>(see instructions)          |                      |  |  |   |
|--|----------------------|--|--|---|
| (a) Transaction number   | (b) Transaction date | (c) Type of transaction<br>1 - Listed<br>2 - Subsequently listed<br>3 - Confidential<br>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? |                      | (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) |
| Yes  | No                   |  |  |   |
|  |                      |  |  |   |
|  |                      |  |  |   |
|  |                      |  |  |   |
|  |                      |  |  |   |
|  |                      |  |  |   |
| <b>Total</b> - 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.

| <b>Part I Prohibited Benefits and Tax Computation</b> |   |   |
|---|---|---|
| (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) |
|   |   |   |
|   |   |   |
|   |   |   |
|   |   |   |

| <b>Part II Summary of Tax Liability of Donors, Donor Advisors, Related Persons, and Proration of Payments</b> |                                    |  |  |
|---|------------------------------------|--|--|
| (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) |
|   |                                    |  |  |
|   |                                    |  |  |
|   |                                    |  |  |
|   |                                    |  |  |
|   |                                    |  |  |
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|   |                                    |  |  |
|   |                                    |  |  |
|   |                                    |  |  |
|   |                                    |  |  |

| <b>Part III Summary of Tax Liability of Fund Managers and Proration of Payments</b> |                                    |  |   |
|---|------------------------------------|--|---|
| (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.)

| <b>Part I Failures to Meet Section 501(r)(3)</b> |                               |                                |  |  |
|--|-------------------------------|--------------------------------|--|--|
| (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  |                               |                                |  |  |

| <b>Part II Computation of Tax</b> |  |
|-----------------------------------|--|
| 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) ..... <b>1</b> |
| 2                                 | Tax - Enter \$50,000 multiplied by line 1 here and on Part I, line 12 ..... <b>2</b>   |

**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 ..... |                         |                              |                                   |
| <b>Total</b> (add column (e) items 1 - 6) .....                             |  |                         |                              |                                   |
| <b>Tax.</b> 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 | <b>Total</b> .....  |         |   |                             |   |   |
| 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.

**EXECUTIVE DIRECTOR**

**Sign Here**

Signature of officer or trustee \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Signature (and organization or entity name if applicable) of manager, self-dealer, disqualified person, donor, donor advisor, or related person \_\_\_\_\_ Date \_\_\_\_\_

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

**Paid Preparer Use Only**

|  |   |                         |   |                          |
|--|---|-------------------------|---|--------------------------|
| Print/Type preparer's name<br><b>CASSE TATE</b>                  | Preparer's signature<br><b>CASSE TATE</b> | Date<br><b>11/15/23</b> | Check <input type="checkbox"/> if self-employed | PTIN<br><b>P01271193</b> |
| Firm's name<br><b>KSM BUSINESS SERVICES, INC</b>                 |   |                         | Firm's EIN<br><b>35-2123203</b>                 |                          |
| Firm's address<br><b>PO BOX 40857<br/>INDIANAPOLIS, IN 46240</b> |   |                         | Phone no. <b>(317) 580-2000</b>                 |                          |

FORM 4720

NO CORRECTION MADE STATEMENT

STATEMENT 1

SCHEDULE AND PART

LINE NUMBER

SCHEDULE E, PART I

1

ACT, INVESTMENT, ITEM OR TRANSACTION DESCRIPTION

GRANT TO NON-EXEMPT ORGANIZATION

EXPLANATION FOR CORRECTION NOT MADE

NO CORRECTIVE ACTION

STEPS BEING TAKEN TO MAKE THE CORRECTION

NO LONGER GRANTING TO NON-EXEMPT ORGANIZATION

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

| (A) ITEM NUMBER | (B) AMOUNT | (C) DATE PAID OR INCURRED | (D) CORRECTION MADE |
|-----------------|------------|---------------------------|---------------------|
| 1               | 2,000.     | 12/31/22                  | N                   |

(E) NAME AND ADDRESS OF RECIPIENT

OKEECHOBEE FRATERNAL ORDER OF POLICE ASSOCIATES, LODGE 69, INC. 4351 HWY 441 N. OKEECHOBEE, FL 34972

(F) DESCRIPTION OF EXPENDITURE AND PURPOSE FOR WHICH MADE

GRANT TO ORGANIZATION

| (G) QUESTION NUMBER | (H) INITIAL TAX IMPOSED ON FOUNDATION | (I) INITIAL TAX IMPOSED ON FOUNDATION MANAGERS |
|---------------------|---------------------------------------|--|
| 5(A)(4)             | 400.                                  |  |
| TOTAL INITIAL TAX   | 400.                                  |  |