### Part I Summary

1. **Briefly describe the organization’s mission or most significant activities:**
   - The Freedom Center for Social Justice is a culture-shifting organization committed to the growth, safety and empowerment of marginalized populations.

2. **Check this box □ if the organization discontinued its operations or disposed of more than 25% of its net assets.**

3. **Number of voting members of the governing body (Part VI, line 1a):**
   - 3

4. **Number of independent voting members of the governing body (Part VI, line 1b):**
   - 13

5. **Total number of individuals employed in calendar year 2021 (Part V, line 2a):**
   - 4

6. **Total number of volunteers (estimate if necessary):**
   - 12

7a. **Total unrelated business revenue from Part VIII, column (C), line 12:**
   - 0

7b. **Net unrelated business taxable income from Form 990-T, Part I, line 11:**
   - 0

### Revenue

<table>
<thead>
<tr>
<th>Description</th>
<th>Prior Year</th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contributions and grants</td>
<td>295,916</td>
<td>484,622</td>
</tr>
<tr>
<td>Program service revenue</td>
<td>183</td>
<td>109</td>
</tr>
<tr>
<td>Investment income</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Other revenue</td>
<td>17,158</td>
<td>4,431</td>
</tr>
<tr>
<td>Total revenue</td>
<td>313,258</td>
<td>489,163</td>
</tr>
</tbody>
</table>

### Expenses

<table>
<thead>
<tr>
<th>Description</th>
<th>Prior Year</th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grants and similar amounts paid</td>
<td>275,749</td>
<td>248,611</td>
</tr>
<tr>
<td>Benefits paid to or for members</td>
<td>108,398</td>
<td>174,470</td>
</tr>
<tr>
<td>Salaries, other compensation, employee benefits</td>
<td>384,147</td>
<td>423,081</td>
</tr>
<tr>
<td>Professional fundraising fees</td>
<td>-70,889</td>
<td>66,082</td>
</tr>
<tr>
<td>Total fundraising expenses</td>
<td>35,389</td>
<td></td>
</tr>
<tr>
<td>Other expenses</td>
<td>109.183</td>
<td>174,470</td>
</tr>
<tr>
<td>Total expenses</td>
<td>384,147</td>
<td>423,081</td>
</tr>
</tbody>
</table>

### Net Assets or Fund Balances

<table>
<thead>
<tr>
<th>Description</th>
<th>Beginning of Current Year</th>
<th>End of Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total assets</td>
<td>104,960</td>
<td>130,185</td>
</tr>
<tr>
<td>Total liabilities</td>
<td>48,730</td>
<td>7,873</td>
</tr>
<tr>
<td>Net assets or fund balances</td>
<td>56,230</td>
<td>122,312</td>
</tr>
</tbody>
</table>

### Part II Signature Block

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

**Signature of officer (or officer’s delegate):**

**Tonyia Rawls**

**Type or print name and title:**

**Executive Director**

**Preparer’s name:**

**Robert Bales**

**Preparer’s signature:**

**Robert Bales**

**Date:**

**Check □ if self-employed:**

**PTIN:**

**P02160108**
Part III  Statement of Program Service Accomplishments

1. Briefly describe the organization’s mission:
   The Freedom Center for Social Justice FCSJ is a culture-shifting organization committed to the growth, safety and empowerment of marginalized populations.

2. Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes ☑ No ☐

   If "Yes," describe these new services on Schedule O.

3. Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes ☑ No ☐

   If "Yes," describe these changes on Schedule O.

4. Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

   **4a** (Code: ) (Expenses $162,205. including grants of $ ) (Revenue $ )
   INTERSECTIONAL PRO-LGBTQ ORGANIZING - THE FOCUS OF THIS EFFORT IS CULTURE SHIFTS AT THE INTERSECTION OF FAITH, RACE, AGE, GENDER EXPRESSION OF SEXUAL ORIENTATION AND SOCIAL JUSTICE. THE TRANSGENDER FAITH AND ACTION NETWORK PROVIDES SUPPORT, NETWORKING AND TRAINING TO TRANS PEOPLE OF FAITH AND ALLIES. THE YEAR-LONG TRANS SEMINARIAIN COHORT IS DONE IN PARTNERSHIP WITH THE PACIFIC SCHOOL OF RELIGION AND THE LGBTQ TASK FORCE. THIS PROGRAM PROVIDES SUPPORT AND TRAINING TO TRANS AND GENDER NON-CONFIRMING PEOPLE IN SEMINARIES AND RELIGIOUS STUDIES PROGRAMS.

   **4b** (Code: ) (Expenses $56,224. including grants of $ ) (Revenue $ )
   SOUTHERN FAITH ORGANIZING LGBTQ ADVOCACY AND CIVIL RIGHTS ENGAGED IN THE PLANNING AND ORGANIZING EFFORTS OF SEVERAL KEY CAMPAIGN INCLUDING THE NORTH CAROLINA NAACP-LED MORAL MONDAY MOVEMENT. WE ARE ALSO COORDINATORS FOR THE LGBTQ ARM OF THE POOR PEOPLE CAMPAIGN’S EFFORTS TO SHIFT THE MORAL NARRATIVE IN OUR NATION IN WAYS THAT SUPPORT POOR AND MARGINALIZED PEOPLE.

   **4c** (Code: ) (Expenses $37,795. including grants of $ ) (Revenue $ )
   LIBERATING THEOLOGIES SPEAKER SERIES PRESENTED IN PARTNERSHIP WITH UNION THEOLOGICAL SEMINARY. THIS EVENT IS AN EXTENSION OF THE FREEDOM CENTER FOR SOCIAL JUSTICE’S DO NO HARM, WHICH WORKS WITH PEOPLE OF FAITH AND THE BROADER COMMUNITY IN NORTH CAROLINA TO SHIFT CULTURE AND NARRATIVES THAT CAUSE HARM THROUGH THE INTERPRETATION OF HOLY TEXT AND OTHER RELIGIOUS WRITING.

4d Other program services (Describe on Schedule O.)

<table>
<thead>
<tr>
<th>Expenses $</th>
<th>including grants of $</th>
<th>(Revenue $)</th>
</tr>
</thead>
<tbody>
<tr>
<td>256,224.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4e Total program service expenses ➤ 256,224.
<table>
<thead>
<tr>
<th>Checklist of Required Schedules</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A.</td>
<td>1</td>
<td>X</td>
</tr>
<tr>
<td>2. Is the organization required to complete Schedule B, Schedule of Contributors? See instructions.</td>
<td>2</td>
<td>X</td>
</tr>
<tr>
<td>3. Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I.</td>
<td>3</td>
<td>X</td>
</tr>
<tr>
<td>4. Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II.</td>
<td>4</td>
<td>X</td>
</tr>
<tr>
<td>5. Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III.</td>
<td>5</td>
<td>X</td>
</tr>
<tr>
<td>6. Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I.</td>
<td>6</td>
<td>X</td>
</tr>
<tr>
<td>7. Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II.</td>
<td>7</td>
<td>X</td>
</tr>
<tr>
<td>8. Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.</td>
<td>8</td>
<td>X</td>
</tr>
<tr>
<td>9. Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV.</td>
<td>9</td>
<td>X</td>
</tr>
<tr>
<td>10. Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If 'Yes,' complete Schedule D, Part V.</td>
<td>10</td>
<td>X</td>
</tr>
<tr>
<td>11. If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.</td>
<td>11</td>
<td>X</td>
</tr>
<tr>
<td>a. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI.</td>
<td>11a</td>
<td>X</td>
</tr>
<tr>
<td>b. Did the organization report an amount for investments — other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.</td>
<td>11b</td>
<td>X</td>
</tr>
<tr>
<td>c. Did the organization report an amount for investments — program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII.</td>
<td>11c</td>
<td>X</td>
</tr>
<tr>
<td>d. Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX.</td>
<td>11d</td>
<td>X</td>
</tr>
<tr>
<td>e. Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X.</td>
<td>11e</td>
<td>X</td>
</tr>
<tr>
<td>f. Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X.</td>
<td>11f</td>
<td>X</td>
</tr>
<tr>
<td>12. If the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII.</td>
<td>12a</td>
<td>X</td>
</tr>
<tr>
<td>b. Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional.</td>
<td>12b</td>
<td>X</td>
</tr>
<tr>
<td>13. Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E.</td>
<td>13</td>
<td>X</td>
</tr>
<tr>
<td>14. Did the organization maintain an office, employees, or agents outside of the United States?</td>
<td>14a</td>
<td>X</td>
</tr>
<tr>
<td>b. Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate investments valued at $100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV.</td>
<td>14b</td>
<td>X</td>
</tr>
<tr>
<td>15. Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV.</td>
<td>15</td>
<td>X</td>
</tr>
<tr>
<td>16. Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV.</td>
<td>16</td>
<td>X</td>
</tr>
<tr>
<td>17. Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11? If 'Yes,' complete Schedule G, Part I. See instructions.</td>
<td>17</td>
<td>X</td>
</tr>
<tr>
<td>18. Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.</td>
<td>18</td>
<td>X</td>
</tr>
<tr>
<td>19. Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.</td>
<td>19</td>
<td>X</td>
</tr>
<tr>
<td>20a. Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H.</td>
<td>20a</td>
<td>X</td>
</tr>
<tr>
<td>b. If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?</td>
<td>20b</td>
<td></td>
</tr>
<tr>
<td>21. Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.</td>
<td>21</td>
<td>X</td>
</tr>
</tbody>
</table>
### Part IV Checklist of Required Schedules (continued)

| 22 | Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III. | Yes | X |
| 23 | Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5, about compensation and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J. | Yes | X |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. | Yes | X |
| 24b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | X |
| 24c | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | X |
| 24d | Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? | X |
| 25a | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I. | Yes | X |
| 25b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I. | Yes | X |
| 26 | Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part II. | Yes | X |
| 27 | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes,' complete Schedule L, Part III. | Yes | X |
| 28 | Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): | | |
| a | A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part IV. | Yes | X |
| b | A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV. | Yes | X |
| c | A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If 'Yes,' complete Schedule L, Part IV. | Yes | X |
| 29 | Did the organization receive more than $25,000 in non-cash contributions? If 'Yes,' complete Schedule M. | Yes | X |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M. | Yes | X |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I. | Yes | X |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II. | Yes | X |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I. | Yes | X |
| 34 | Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1. | Yes | X |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | Yes | X |
| b | If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2. | Yes | X |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2. | Yes | X |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI. | Yes | X |

### Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V.

| 1a | Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable. | Yes | X |
| 1b | Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable. | Yes | X |
| 1c | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | Yes | X |
### Part V: Statements Regarding Other IRS Filings and Tax Compliance (continued)

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.

2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

3a Did the organization have unrelated business gross income of $1,000 or more during the year?

3b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation on Schedule O.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?

4b If 'Yes,' enter the name of the foreign country:


5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?

5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?

5c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

6a Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?

6b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

7 Organizations that may receive deductible contributions under section 170(c).

7a Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

7b Did the organization notify the donor of the value of the goods or services provided?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

7c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

7d If 'Yes,' indicate the number of Forms 8282 filed during the year.

<p>| |</p>
<table>
<thead>
<tr>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

7e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

7g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

7h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?

8a Did the sponsoring organization make any taxable distributions under section 4966?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

8b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

9 Section 501(c)(7) organizations.

9a Initiation fees and capital contributions included on Part VIII, line 12.

9b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.

10a Enter:

10b Enter:

11a Gross income from members or shareholders.

11b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

12b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year.

<p>| |</p>
<table>
<thead>
<tr>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

12c Enter:

13a Is the organization licensed to issue qualified health plans in more than one state?

Note: See the instructions for additional information the organization must report on Schedule O.

13b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.

13c Enter the amount of reserves on hand.

14a Did the organization receive any payments for indoor tanning services during the tax year?

14b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

15 Is the organization 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?

16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

17 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?

If 'Yes,' complete Form 6069.
### Part VI. Governance, Management, and Disclosure

**Section A. Governing Body and Management**

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a. Enter the number of voting members of the governing body at the end</td>
<td>1a</td>
<td></td>
</tr>
<tr>
<td>of the tax year. If there are material differences in voting rights among</td>
<td></td>
<td></td>
</tr>
<tr>
<td>members of the governing body, or if the governing body delegated broad</td>
<td></td>
<td></td>
</tr>
<tr>
<td>authority to an executive committee or similar committee, explain on</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Schedule O.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Enter the number of voting members included on line 1a, above, who</td>
<td>1b</td>
<td></td>
</tr>
<tr>
<td>are independent.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Did any officer, director, trustee, or key employee have a family</td>
<td>2</td>
<td>X</td>
</tr>
<tr>
<td>relationship or a business relationship with any other officer, director,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>trustee, or key employee?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Did the organization delegate control over management duties</td>
<td>3</td>
<td>X</td>
</tr>
<tr>
<td>customarily performed by or under the direct supervision of officers,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>directors, trustees, or key employees to a management company or another</td>
<td></td>
<td></td>
</tr>
<tr>
<td>person?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Did the organization make any significant changes to its governing</td>
<td>4</td>
<td>X</td>
</tr>
<tr>
<td>documents since the prior Form 990 was filed?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Did the organization become aware during the year of a significant</td>
<td>5</td>
<td>X</td>
</tr>
<tr>
<td>diversion of the organization’s assets?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Did the organization have members or stockholders?</td>
<td>6</td>
<td>X</td>
</tr>
<tr>
<td>7a. Did the organization have members, stockholders, or other persons</td>
<td>7a</td>
<td>X</td>
</tr>
<tr>
<td>who had the power to elect or appoint one or more members of the</td>
<td></td>
<td></td>
</tr>
<tr>
<td>governing body?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Are any governance decisions of the organization reserved to (or</td>
<td>7b</td>
<td>X</td>
</tr>
<tr>
<td>subject to approval by) members, stockholders, or persons other than</td>
<td></td>
<td></td>
</tr>
<tr>
<td>the governing body?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Did the organization contemporaneously document the meetings held or</td>
<td>8</td>
<td>X</td>
</tr>
<tr>
<td>written actions undertaken during the year by the following:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. The governing body?</td>
<td>8a</td>
<td></td>
</tr>
<tr>
<td>b. Each committee with authority to act on behalf of the governing body</td>
<td>8b</td>
<td></td>
</tr>
<tr>
<td>9. Is there any officer, director, trustee, or key employee listed in</td>
<td>9</td>
<td>X</td>
</tr>
<tr>
<td>Part VII, Section A, who cannot be reached at the organization’s</td>
<td></td>
<td></td>
</tr>
<tr>
<td>mailing address?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| **Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>10a. Did the organization have local chapters, branches, or affiliates?</td>
<td>10a</td>
<td>X</td>
</tr>
<tr>
<td>b. If ‘Yes,’ did the organization have written policies and procedures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>governing the activities of such chapters, branches, and affiliates to</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ensure their operations are consistent with the organization’s exempt</td>
<td></td>
<td></td>
</tr>
<tr>
<td>purposes?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11a. Has the organization provided a complete copy of this Form 990 to</td>
<td>11a</td>
<td>X</td>
</tr>
<tr>
<td>all members of its governing body before filing the form?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Describe on Schedule O the process, if any, used by the organization</td>
<td></td>
<td></td>
</tr>
<tr>
<td>to review this Form 990.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12a. Did the organization have a written conflict of interest policy?</td>
<td>12a</td>
<td>X</td>
</tr>
<tr>
<td>b. Were officers, directors, or trustees, and key employees required to</td>
<td></td>
<td></td>
</tr>
<tr>
<td>disclose annually interests that could give rise to conflicts?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Did the organization regularly and consistently monitor and enforce</td>
<td>12c</td>
<td>X</td>
</tr>
<tr>
<td>compliance with the policy?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. Did the organization have a written whistleblower policy?</td>
<td>13</td>
<td>X</td>
</tr>
<tr>
<td>14. Did the organization have a written document retention and</td>
<td>14</td>
<td>X</td>
</tr>
<tr>
<td>destruction policy?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15. Did the process for determining compensation of the following</td>
<td>15a</td>
<td>X</td>
</tr>
<tr>
<td>persons include a review and approval by independent persons,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>comparability data, and contemporaneous substantiation of the</td>
<td></td>
<td></td>
</tr>
<tr>
<td>deliberation and decision?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. The organization’s CEO, Executive Director, or top management</td>
<td>15b</td>
<td>X</td>
</tr>
<tr>
<td>official.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Other officers or key employees of the organization.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If ‘Yes’ to line 15a or 15b, describe the process on Schedule O.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16a. Did the organization invest in, contribute assets to, or participate</td>
<td>16a</td>
<td>X</td>
</tr>
<tr>
<td>in a joint venture or similar arrangement with a taxable entity during</td>
<td></td>
<td></td>
</tr>
<tr>
<td>the year?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. If ‘Yes,’ did the organization follow a written policy or procedure</td>
<td>16b</td>
<td></td>
</tr>
<tr>
<td>requiring the organization to evaluate its participation in joint</td>
<td></td>
<td></td>
</tr>
<tr>
<td>venture arrangements under applicable federal tax law, and take steps</td>
<td></td>
<td></td>
</tr>
<tr>
<td>to safeguard the organization’s exempt status with respect to such</td>
<td></td>
<td></td>
</tr>
<tr>
<td>arrangements?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Section C. Disclosure**

| Question                                                                 | None | |
|--------------------------------------------------------------------------|------||
| 17. List the states with which a copy of this Form 990 is required to be  |      | |
| filed.                                                                   |      | |
| 18. Section 6104 requires an organization to make its Forms 1023 (1024-   |      | |
| A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available   |      | |
| for public inspection. Indicate how you made these available. Check all  |      | |
| that apply.                                                              |      | |
| [ ] Own website [ ] Another’s website [X] Upon request [ ] Other (explain |      | |
| on Schedule O)                                                          |      | |
| 19. Describe on Schedule O whether (and if so, how) the organization     |      | |
| made its governing documents, conflict of interest policy, and financial  |      | |
| statements available to the public during the tax year.                  |      | |
| See Schedule O                                                           |      | |
| 20. State the name, address, and telephone number of the person who      |      | |
| possesses the organization’s books and records.                          |      | |
| [ ] Tonyia Rawls 4921 Albemarle Road, Suite 201 Charlotte NC 28205 (704) |      | |
| (904)-3182                                                              |      | |

BAA

TEEA0106L 09/22/21
### Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII. ...................................................... ☐

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization’s tax year.

- List all of the organization’s current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization’s current key employees, if any. See the instructions for definition of ‘key employee.’
- List the organization’s five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than $100,000 from the organization and any related organizations.
- List all of the organization’s former officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization’s former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(C) Average hours per week</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>TONYIA RAWLS</td>
<td>Executive Dir.</td>
<td>40</td>
<td>0</td>
<td>78,155</td>
<td>0</td>
</tr>
<tr>
<td>ANGEL COLLIE</td>
<td>Secretary</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>HOPE BARRETT</td>
<td>Chairman</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>CHRISTINA ADELEKE</td>
<td>Treasurer</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>ELIZABETH WHITE</td>
<td>Trustee</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>SANDRA BARNES</td>
<td>Trustee</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>CASSANDRA GRANT</td>
<td>Trustee</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>ANTHONY PASTRANA</td>
<td>Trustee</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>RODNEY MCKENZIE JR</td>
<td>Trustee</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>JONATHAN BARRIO</td>
<td>Trustee</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>VERONICA CALDERON</td>
<td>Trustee</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>CIARA LILLY</td>
<td>Trustee</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>MARSHA FOSTER - BOYD</td>
<td>Trustee</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Position</th>
<th>(C) Average hours per week (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(15)</td>
<td></td>
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<td></td>
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<tr>
<td>(16)</td>
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<td>(18)</td>
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<td>(19)</td>
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<td>(20)</td>
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<td>(23)</td>
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<td>(24)</td>
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<td></td>
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</tr>
<tr>
<td>(25)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1b Subtotal: 78,155. 0. 0.

c Total from continuation sheets to Part VII, Section A: 0. 0. 0.

d Total (add lines 1b and 1c): 78,155. 0. 0.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization: 0.

<table>
<thead>
<tr>
<th>3</th>
<th>Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual.</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td></td>
<td>3</td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4</th>
<th>For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? If 'Yes,' complete Schedule J for such individual.</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td></td>
<td>4</td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5</th>
<th>Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If 'Yes,' complete Schedule J for such person.</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td></td>
<td>5</td>
<td>X</td>
</tr>
</tbody>
</table>

### Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization’s tax year.

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization: 0.
### Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII...

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants, and Other Similar Amounts</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1a</strong> Federated campaigns</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>1b</strong> Membership dues</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>1c</strong> Fundraising events</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>1d</strong> Related organizations</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>1e</strong> Government grants (contributions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>1f</strong> All other contributions, gifts, grants, and similar amounts not included above</td>
<td></td>
<td></td>
<td>1f</td>
<td>484,622.</td>
</tr>
<tr>
<td><strong>1g</strong> Noncash contributions included in lines 1a-1f</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>h Total. Add lines 1a-1f</strong></td>
<td></td>
<td></td>
<td></td>
<td>484,622.</td>
</tr>
</tbody>
</table>

### Program Service Revenue

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants, and Other Similar Amounts</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>2 a TRAN4600 - Merchandise</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>b</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>c</strong></td>
<td></td>
<td></td>
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</tr>
<tr>
<td><strong>d</strong></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td><strong>e</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>f</strong> All other program service revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>g Total. Add lines 2a-2f</strong></td>
<td></td>
<td></td>
<td></td>
<td>109.</td>
</tr>
</tbody>
</table>

### Other Revenue

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants, and Other Similar Amounts</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>3</strong> Investment income (including dividends, interest, and other similar amounts)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>4</strong> Income from investment of tax-exempt bond proceeds</td>
<td></td>
<td></td>
<td></td>
<td>1.</td>
</tr>
<tr>
<td><strong>5</strong> Royalties</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>6 a</strong> Gross rents</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>b</strong> Less: rental expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>c</strong> Rental income or (loss)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>d</strong> Net rental income or (loss)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Noncash revenue

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants, and Other Similar Amounts</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>7 a</strong> Gross amount from sales of assets other than inventory</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>b</strong> Less: cost or other basis and sales expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>c</strong> Gain or (loss)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>d</strong> Net gain or (loss)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Income from fundraising events

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants, and Other Similar Amounts</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>8 a</strong> Gross income from fundraising events (not including $ of contributions reported on line 1c).</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>b</strong> Less: direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>c</strong> Net income or (loss) from fundraising events</td>
<td></td>
<td></td>
<td></td>
<td>3,706.</td>
</tr>
</tbody>
</table>

### Income from gaming activities

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants, and Other Similar Amounts</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>9 a</strong> Gross income from gaming activities.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>b</strong> Less: direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>c</strong> Net income or (loss) from gaming activities</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Gross sales of inventory

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants, and Other Similar Amounts</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>10 a</strong> Gross sales of inventory, less returns and allowances</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>b</strong> Less: cost of goods sold</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>c</strong> Net income or (loss) from sales of inventory</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Miscellaneous Revenue

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants, and Other Similar Amounts</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>11 a</strong> INC4550 - Third Party Events</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>b</strong> Other Income</td>
<td></td>
<td></td>
<td></td>
<td>295.</td>
</tr>
<tr>
<td><strong>c</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>d</strong> All other revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>e</strong> Total. Add lines 11a-11d</td>
<td></td>
<td></td>
<td></td>
<td>725.</td>
</tr>
<tr>
<td><strong>f Total revenue. See instructions</strong></td>
<td></td>
<td></td>
<td></td>
<td>489,163.</td>
</tr>
</tbody>
</table>

---

**Business Code**

**BAA**

TEEA0109L  09/22/21
## Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX [X]

<table>
<thead>
<tr>
<th>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</th>
<th>(A) Total expenses</th>
<th>(B) Program service expenses</th>
<th>(C) Management and general expenses</th>
<th>(D) Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21</td>
<td>78,155</td>
<td>54,709</td>
<td>7,816</td>
<td>15,630</td>
</tr>
<tr>
<td>2 Grants and other assistance to domestic individuals. See Part IV, line 22</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16</td>
<td>151,810</td>
<td>120,327</td>
<td>14,745</td>
<td>16,738</td>
</tr>
<tr>
<td>4 Benefits paid to or for members</td>
<td>18,646</td>
<td>14,508</td>
<td>1,474</td>
<td>2,664</td>
</tr>
<tr>
<td>5 Compensation of current officers, directors, trustees, and key employees</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>6 Compensation not included above to disqualified persons (as defined under section 4958(c)(3)(B))</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>7 Other salaries and wages</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)</td>
<td>151,810</td>
<td>120,327</td>
<td>14,745</td>
<td>16,738</td>
</tr>
<tr>
<td>9 Other employee benefits</td>
<td>18,646</td>
<td>14,508</td>
<td>1,474</td>
<td>2,664</td>
</tr>
<tr>
<td>10 Payroll taxes</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>11 Fees for services (nonemployees):</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>a Management</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>b Legal</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>c Accounting</td>
<td>5,084</td>
<td>5,084</td>
<td>5,084</td>
<td></td>
</tr>
<tr>
<td>d Lobbying</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>e Professional fundraising services. See Part IV, line 17</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>f Investment management fees</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>12 Advertising and promotion</td>
<td>2,877</td>
<td>2,714</td>
<td>163</td>
<td>163</td>
</tr>
<tr>
<td>13 Office expenses</td>
<td>3,532</td>
<td>624</td>
<td>2,908</td>
<td>2,908</td>
</tr>
<tr>
<td>14 Information technology</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>15 Royalties</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>16 Occupancy</td>
<td>24,383</td>
<td>2,316</td>
<td>22,067</td>
<td>22,067</td>
</tr>
<tr>
<td>17 Travel</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>18 Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>19 Conferences, conventions, and meetings</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>20 Interest</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>21 Payments to affiliates</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>22 Depreciation, depletion, and amortization</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>23 Insurance</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)</td>
<td>88,852</td>
<td>41,721</td>
<td>46,774</td>
<td>357</td>
</tr>
<tr>
<td>a GEN5002-Health Insurance</td>
<td>30,437</td>
<td>30,437</td>
<td>30,437</td>
<td></td>
</tr>
<tr>
<td>b INT5200-Rent</td>
<td>6,600</td>
<td>6,600</td>
<td>6,600</td>
<td></td>
</tr>
<tr>
<td>c LT5005-CONTRACTOR</td>
<td>6,511</td>
<td>6,511</td>
<td>6,511</td>
<td></td>
</tr>
<tr>
<td>d INT5850-Partner Events</td>
<td>6,194</td>
<td>6,194</td>
<td>6,194</td>
<td></td>
</tr>
<tr>
<td>e All other expenses. See Sch. O</td>
<td>88,852</td>
<td>41,721</td>
<td>46,774</td>
<td>357</td>
</tr>
<tr>
<td>25 Total functional expenses. Add lines 1 through 24e</td>
<td>423,081</td>
<td>256,224</td>
<td>131,468</td>
<td>35,389</td>
</tr>
</tbody>
</table>

**Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720) [ ]
**Part X Balance Sheet**

Check if Schedule O contains a response or note to any line in this Part X. 

<table>
<thead>
<tr>
<th></th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Cash - non-interest-bearing</td>
<td>103,910</td>
</tr>
<tr>
<td>2</td>
<td>Savings and temporary cash investments.</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Pledges and grants receivable, net</td>
<td>4</td>
</tr>
<tr>
<td>4</td>
<td>Accounts receivable, net</td>
<td>5</td>
</tr>
<tr>
<td>5</td>
<td>Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons</td>
<td>6</td>
</tr>
<tr>
<td>6</td>
<td>Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)</td>
<td>7</td>
</tr>
<tr>
<td>7</td>
<td>Notes and loans receivable, net</td>
<td>8</td>
</tr>
<tr>
<td>8</td>
<td>Inventories for sale or use</td>
<td>9</td>
</tr>
<tr>
<td>9</td>
<td>Prepaid expenses and deferred charges</td>
<td>1,050</td>
</tr>
<tr>
<td>10a</td>
<td>Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D</td>
<td>10b</td>
</tr>
<tr>
<td>11</td>
<td>Investments — publicly traded securities</td>
<td>10c</td>
</tr>
<tr>
<td>12</td>
<td>Investments — other securities. See Part IV, line 11</td>
<td>11</td>
</tr>
<tr>
<td>13</td>
<td>Investments — program-related. See Part IV, line 11</td>
<td>12</td>
</tr>
<tr>
<td>14</td>
<td>Intangible assets</td>
<td>13</td>
</tr>
<tr>
<td>15</td>
<td>Other assets. See Part IV, line 11</td>
<td>14</td>
</tr>
<tr>
<td>16</td>
<td>Total assets. Add lines 1 through 15 (must equal line 33)</td>
<td>104,960</td>
</tr>
<tr>
<td>17</td>
<td>Accounts payable and accrued expenses</td>
<td>17</td>
</tr>
<tr>
<td>18</td>
<td>Grants payable</td>
<td>18</td>
</tr>
<tr>
<td>19</td>
<td>Deferred revenue</td>
<td>19</td>
</tr>
<tr>
<td>20</td>
<td>Tax-exempt bond liabilities</td>
<td>20</td>
</tr>
<tr>
<td>21</td>
<td>Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td>21</td>
</tr>
<tr>
<td>22</td>
<td>Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons</td>
<td>22</td>
</tr>
<tr>
<td>23</td>
<td>Secured mortgages and notes payable to unrelated third parties</td>
<td>23</td>
</tr>
<tr>
<td>24</td>
<td>Unsecured notes and loans payable to unrelated third parties</td>
<td>48,730</td>
</tr>
<tr>
<td>25</td>
<td>Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D</td>
<td>25</td>
</tr>
<tr>
<td>26</td>
<td>Total liabilities. Add lines 17 through 25</td>
<td>48,730</td>
</tr>
</tbody>
</table>

**Liabilities**

**Net Assets or Fund Balances**

<table>
<thead>
<tr>
<th></th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>27</td>
<td>Net assets without donor restrictions</td>
<td>56,230</td>
</tr>
<tr>
<td>28</td>
<td>Net assets with donor restrictions</td>
<td>28</td>
</tr>
<tr>
<td>29</td>
<td>Capital stock or trust principal, or current funds</td>
<td>29</td>
</tr>
<tr>
<td>30</td>
<td>Paid-in or capital surplus, or land, building, or equipment fund</td>
<td>30</td>
</tr>
<tr>
<td>31</td>
<td>Retained earnings, endowment, accumulated income, or other funds</td>
<td>31</td>
</tr>
<tr>
<td>32</td>
<td>Total net assets or fund balances</td>
<td>56,230</td>
</tr>
<tr>
<td>33</td>
<td>Total liabilities and net assets/fund balances</td>
<td>104,960</td>
</tr>
</tbody>
</table>
### Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI.

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
<td>489,163</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
<td>423,081</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses. Subtract line 2 from line 1</td>
<td>66,082</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))</td>
<td>56,230</td>
</tr>
<tr>
<td>5</td>
<td>Net unrealized gains (losses) on investments</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Donated services and use of facilities</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Investment expenses</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Prior period adjustments</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Other changes in net assets or fund balances (explain on Schedule O)</td>
<td>0</td>
</tr>
<tr>
<td>10</td>
<td>Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))</td>
<td>122,312</td>
</tr>
</tbody>
</table>

### Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII.

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Accounting method used to prepare the Form 990: X Cash □ Accrual □ Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td>Were the organization's financial statements compiled or reviewed by an independent accountant?</td>
<td>2a X</td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td>Were the organization's financial statements audited by an independent accountant?</td>
<td>2b X</td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td>As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?</td>
<td>3a X</td>
<td></td>
</tr>
<tr>
<td>3b</td>
<td>If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits</td>
<td>3b</td>
<td></td>
</tr>
</tbody>
</table>
Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

### Automatic 6-Month Extension of Time

Only submit original (no copies needed).

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

#### Name of exempt organization or other filer, see instructions.

**Freedom Center for Social Justice**

Taxpayer identification number (TIN): **45-4000599**

#### Number, street, and room or suite number. If a P.O. box, see instructions.

**4921 Albemarle Road, Suite 201**

City, town or post office, state, and ZIP code: **Charlotte, NC 28205**

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

<table>
<thead>
<tr>
<th>Application Is For</th>
<th>Return Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Form 990 or Form 990-EZ</td>
<td>01</td>
</tr>
<tr>
<td>Form 4720 (individual)</td>
<td>03</td>
</tr>
<tr>
<td>Form 990-PF</td>
<td>04</td>
</tr>
<tr>
<td>Form 990-T (section 401(a) or 408(a) trust)</td>
<td>05</td>
</tr>
<tr>
<td>Form 990-T (trust other than above)</td>
<td>06</td>
</tr>
<tr>
<td>Form 990-T (corporation)</td>
<td>07</td>
</tr>
<tr>
<td>Form 1041-A</td>
<td>08</td>
</tr>
<tr>
<td>Form 4720 (other than individual)</td>
<td>09</td>
</tr>
<tr>
<td>Form 5227</td>
<td>10</td>
</tr>
<tr>
<td>Form 6069</td>
<td>11</td>
</tr>
<tr>
<td>Form 8870</td>
<td>12</td>
</tr>
</tbody>
</table>

#### Telephone No.: **(704) 904-3182**

Fax No.: **The books are in the care of Tonyia Rawls**

#### If the organization does not have an office or place of business in the United States, check this box. **☐**

#### If this is a Group Return, enter the organization's four digit Group Exemption Number (GEN) **☐**. If this is for the whole group, check this box **☐**. If it is for part of the group, check this box **☐** and attach a list with the names and TINs of all members the extension is for.

**The books are in the care of Tonyia Rawls**

#### I request an automatic 6-month extension of time until **5/15 2023**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- calendar year 2022 ☐
- tax year beginning **7/01 2021** and ending **6/30 2022** ☑
- ☐

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

#### If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. **3a $0.**

#### If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. **3b $0.**

#### Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. **3c $0.**

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

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.
**Part I: Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

<table>
<thead>
<tr>
<th>Reason for Public Charity Status</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>An organization operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).</td>
<td>☑</td>
<td></td>
</tr>
</tbody>
</table>

**Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

**Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

**Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

**Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

**Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.**

**Enter the number of supported organizations.**

<table>
<thead>
<tr>
<th>Name of supported organization</th>
<th>EIN</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total**

---

**Name of the organization:** Freedom Center for Social Justice  
**Employer identification number:** 45-4000599
### Section A. Public Support

**Calendar year (or fiscal year beginning in):**

<table>
<thead>
<tr>
<th></th>
<th>(a) 2017</th>
<th>(b) 2018</th>
<th>(c) 2019</th>
<th>(d) 2020</th>
<th>(e) 2021</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants'.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>The value of services or facilities furnished by a governmental unit to the organization without charge.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td><strong>Total.</strong> Add lines 1 through 3.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td><strong>Public support.</strong> Subtract line 5 from line 4.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Total Support

**Calendar year (or fiscal year beginning in):**

<table>
<thead>
<tr>
<th></th>
<th>(a) 2017</th>
<th>(b) 2018</th>
<th>(c) 2019</th>
<th>(d) 2020</th>
<th>(e) 2021</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Amounts from line 4.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Net income from unrelated business activities, whether or not the business is regularly carried on.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI).</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td><strong>Total support.</strong> Add lines 7 through 10.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Gross receipts from related activities, etc. (see instructions).</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td><strong>First 5 years.</strong> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th></th>
<th>2021</th>
<th>2020</th>
<th>14</th>
<th>15</th>
</tr>
</thead>
<tbody>
<tr>
<td>14</td>
<td>Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)).</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Public support percentage from 2020 Schedule A, Part II, line 14.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

16a **33-1/3% support test—2021.** If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. |  |

17a **10%-facts-and-circumstances test—2021.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization. |  |

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. |  |
### Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

#### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2017</th>
<th>(b) 2018</th>
<th>(c) 2019</th>
<th>(d) 2020</th>
<th>(e) 2021</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td>314,478.</td>
<td>470,682.</td>
<td>507,063.</td>
<td>313,074.</td>
<td>489,163.</td>
<td>2,094,460.</td>
</tr>
<tr>
<td>2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>5 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>6 Total. Add lines 1 through 5</td>
<td>314,478.</td>
<td>470,682.</td>
<td>507,063.</td>
<td>313,074.</td>
<td>489,163.</td>
<td>2,094,460.</td>
</tr>
<tr>
<td>7a Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>7b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>8 Public support. (Add line 7a and 7b)</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
</tbody>
</table>

#### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2017</th>
<th>(b) 2018</th>
<th>(c) 2019</th>
<th>(d) 2020</th>
<th>(e) 2021</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 Amounts from line 6</td>
<td>314,478.</td>
<td>470,682.</td>
<td>507,063.</td>
<td>313,074.</td>
<td>489,163.</td>
<td>2,094,460.</td>
</tr>
<tr>
<td>10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1.</td>
<td>2.</td>
</tr>
<tr>
<td>10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>1.</td>
<td>1.</td>
<td>2.</td>
</tr>
<tr>
<td>12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>13 Total support. (Add lines 9, 10c, 11, and 12)</td>
<td>314,478.</td>
<td>470,682.</td>
<td>507,063.</td>
<td>313,075.</td>
<td>489,164.</td>
<td>2,094,462.</td>
</tr>
<tr>
<td>14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th>(f) Total</th>
<th>15</th>
<th>100.00 %</th>
</tr>
</thead>
<tbody>
<tr>
<td>16</td>
<td>100.00 %</td>
<td></td>
</tr>
</tbody>
</table>

#### Section D. Computation of Investment Income Percentage

<table>
<thead>
<tr>
<th>(f) Total</th>
<th>17</th>
<th>0.00 %</th>
</tr>
</thead>
<tbody>
<tr>
<td>18</td>
<td>0.00 %</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(f) Total</th>
<th>19a</th>
<th>X</th>
</tr>
</thead>
<tbody>
<tr>
<td>19b</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(f) Total</th>
<th>20</th>
<th>X</th>
</tr>
</thead>
</table>

BAA TEEA0403L 08/31/21
### Section A. All Supporting Organizations

#### 1. Are all of the organization's supported organizations listed by name in the organization's governing documents? 
- **Yes**
- **No**

#### 2. Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? 
- **Yes**
- **No**

#### 3a. Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? 
- **Yes**
- **No**

#### b. Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? 
- **Yes**
- **No**

#### c. Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? 
- **Yes**
- **No**

#### 4a. Was any supported organization not organized in the United States ('foreign supported organization')? 
- **Yes**
- **No**

#### b. Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? 
- **Yes**
- **No**

#### c. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? 
- **Yes**
- **No**

#### 5a. Did the organization add, substitute, or remove any supported organizations during the tax year? 
- **Yes**
- **No**

#### b. Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 
- **Yes**
- **No**

#### c. Substitutions only. Was the substitution the result of an event beyond the organization's control? 
- **Yes**
- **No**

#### 6. Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? 
- **Yes**
- **No**

#### 7. Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? 
- **Yes**
- **No**

#### 8. Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? 
- **Yes**
- **No**

#### 9a. Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? 
- **Yes**
- **No**

#### b. Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? 
- **Yes**
- **No**

#### c. Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? 
- **Yes**
- **No**

#### 10a. Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? 
- **Yes**
- **No**

#### b. Did the organization have any excess business holdings in the tax year? 
- **Yes**
- **No**
### Section B. Type I Supporting Organizations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>11 Has the organization accepted a gift or contribution from any of the following persons?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>b. A family member of a person described on line 11a above?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. A 35% controlled entity of a person described on line 11a or 11b above?</td>
<td>Y</td>
<td>N</td>
</tr>
</tbody>
</table>

### Section C. Type II Supporting Organizations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Were a majority of the organization’s directors or trustees during the tax year also a majority of the directors or trustees of each of the organization’s supported organization(s)?</td>
<td>Y</td>
<td>N</td>
</tr>
</tbody>
</table>

### Section D. All Type III Supporting Organizations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization’s tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization’s governing documents in effect on the date of notification, to the extent not previously provided?</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>2 Were any of the organization’s officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization?</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>3 By reason of the relationship described on line 2, above, did the organization’s supported organizations have a significant voice in the organization’s investment policies and in directing the use of the organization’s income or assets at all times during the tax year?</td>
<td>Y</td>
<td>N</td>
</tr>
</tbody>
</table>

### Section E. Type III Functionally Integrated Supporting Organizations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year <em>(see instructions)</em>.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. The organization satisfied the Activities Test. <em>Complete line 2 below.</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. The organization is the parent of each of its supported organizations. <em>Complete line 3 below.</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. The organization supported a governmental entity. <em>Describe in Part VI how you supported a governmental entity (see instructions).</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Activities Test. <em>Answer lines 2a and 2b below.</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Did substantially all of the organization’s activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If ‘Yes,’ <em>then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</em></td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>b. Did the activities described on line 2a, above, constitute activities that, but for the organization’s involvement, one or more of the organization’s supported organization(s) would have been engaged in? If ‘Yes,’ <em>explain in Part VI the reasons for the organization’s position that its supported organization(s) would have engaged in these activities but for the organization’s involvement.</em></td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>3 Parent of Supported Organizations. <em>Answer lines 3a and 3b below.</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If ‘Yes’ or ‘No,’ <em>provide details in Part VI.</em></td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>b. Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If ‘Yes,’ <em>describe in Part VI the role played by the organization in this regard.</em></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part V  Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1. Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI).

#### Section A — Adjusted Net Income

<table>
<thead>
<tr>
<th></th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Net short-term capital gain</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>2 Recoveries of prior-year distributions</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>3 Other gross income (see instructions)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>4 Add lines 1 through 3.</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>5 Depreciation and depletion</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>7 Other expenses (see instructions)</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)</td>
<td>8</td>
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#### Section B — Minimum Asset Amount

<table>
<thead>
<tr>
<th></th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
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<tr>
<td>1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Average monthly value of securities</td>
<td>1a</td>
<td></td>
</tr>
<tr>
<td>b Average monthly cash balances</td>
<td>1b</td>
<td></td>
</tr>
<tr>
<td>c Fair market value of other non-exempt-use assets</td>
<td>1c</td>
<td></td>
</tr>
<tr>
<td>d Total (add lines 1a, 1b, and 1c)</td>
<td>1d</td>
<td></td>
</tr>
<tr>
<td>e Discount claimed for blockage or other factors (explain in detail in Part VI):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Acquisition indebtedness applicable to non-exempt-use assets</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>3 Subtract line 2 from line 1d.</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).</td>
<td>4</td>
<td></td>
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<tr>
<td>5 Net value of non-exempt-use assets (subtract line 4 from line 3)</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>6 Multiply line 5 by 0.035.</td>
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<td></td>
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<tr>
<td>7 Recoveries of prior-year distributions</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>8 Minimum Asset Amount (add line 7 to line 6)</td>
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#### Section C — Distributable Amount

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<tr>
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<th>Current Year</th>
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<tbody>
<tr>
<td>1 Adjusted net income for prior year (from Section A, line 8, column A)</td>
<td>1</td>
</tr>
<tr>
<td>2 Enter 0.85 of line 1.</td>
<td>2</td>
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<tr>
<td>3 Minimum asset amount for prior year (from Section B, line 8, column A)</td>
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</tr>
<tr>
<td>4 Enter greater of line 2 or line 3.</td>
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<tr>
<td>5 Income tax imposed in prior year</td>
<td>5</td>
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<tr>
<td>6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).</td>
<td>6</td>
</tr>
<tr>
<td>7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).</td>
<td></td>
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### Part V

#### Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

**Section D — Distributions**

<table>
<thead>
<tr>
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<th>Current Year</th>
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<tbody>
<tr>
<td>1</td>
<td>Amounts paid to supported organizations to accomplish exempt purposes</td>
</tr>
<tr>
<td>2</td>
<td>Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity</td>
</tr>
<tr>
<td>3</td>
<td>Administrative expenses paid to accomplish exempt purposes of supported organizations</td>
</tr>
<tr>
<td>4</td>
<td>Amounts paid to acquire exempt-use assets</td>
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<tr>
<td>5</td>
<td>Qualified set-aside amounts (prior IRS approval required — provide details in Part VI)</td>
</tr>
<tr>
<td>6</td>
<td>Other distributions (describe in Part VI). See instructions.</td>
</tr>
<tr>
<td>7</td>
<td>Total annual distributions. Add lines 1 through 6.</td>
</tr>
<tr>
<td>8</td>
<td>Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.</td>
</tr>
<tr>
<td>9</td>
<td>Distributable amount for 2021 from Section C, line 6</td>
</tr>
<tr>
<td>10</td>
<td>Line 8 amount divided by line 9 amount</td>
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#### Section E — Distribution Allocations (see instructions)

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<thead>
<tr>
<th></th>
<th>(i) Excess Distributions</th>
<th>(ii) Underdistributions Pre-2021</th>
<th>(iii) Distributable Amount for 2021</th>
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<tr>
<td>1</td>
<td>Distributable amount for 2021 from Section C, line 6</td>
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<td>2</td>
<td>Underdistributions, if any, for years prior to 2021 (reasonable cause required — explain in Part VI). See instructions.</td>
<td></td>
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<tr>
<td>3</td>
<td>Excess distributions carryover, if any, to 2021</td>
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</tr>
<tr>
<td>a</td>
<td>From 2016 ...............</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>From 2017 ...............</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>From 2018 ...............</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>From 2019 ...............</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>From 2020 ...............</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Total of lines 3a through 3e</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Applied to underdistributions of prior years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>h</td>
<td>Applied to 2021 distributable amount</td>
<td></td>
<td></td>
</tr>
<tr>
<td>i</td>
<td>Carryover from 2016 not applied (see instructions)</td>
<td></td>
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<tr>
<td>j</td>
<td>Remainder. Subtract lines 3g, 3h, and 3i from line 3f.</td>
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<tr>
<td>4</td>
<td>Distributions for 2021 from Section D, line 7:</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Applied to underdistributions of prior years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Applied to 2021 distributable amount</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Remainder. Subtract lines 4a and 4b from line 4.</td>
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</tr>
<tr>
<td>5</td>
<td>Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.</td>
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</tr>
<tr>
<td>6</td>
<td>Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Excess distributions carryover to 2022. Add lines 3j and 4c.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Breakdown of line 7:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Excess from 2017 .......</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Excess from 2018 .......</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Excess from 2019 .......</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Excess from 2020 .......</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Excess from 2021 .......</td>
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</tr>
</tbody>
</table>
Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1a; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
Form 990, Part VI, Line 11b - Form 990 Review Process

No review was or will be conducted.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

No other documents available to the public.

Form 990, Part IX, Line 24e

Other Expenses

<table>
<thead>
<tr>
<th></th>
<th>(A) Total</th>
<th>(B) Program Services</th>
<th>(C) Management &amp; General</th>
<th>(D) Fundraising</th>
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</thead>
<tbody>
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<tr>
<td>FAI5103-Meals - Staff</td>
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<td>FAI511 - MEALS NON STAFF</td>
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<td>FAI5203-IT</td>
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<td>341.</td>
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<tr>
<td>FAI5300-Phone/Internet</td>
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<td>FAI5301-Website</td>
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<td>FAI5303-Video</td>
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<td>FAI5304 - DATABASE</td>
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<td>FAI5305-Email/Communications</td>
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<td>FAI5400-Continuing Education -</td>
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<td>FAI5500-Postage</td>
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<td>FAI5801 - EVENT ATTENDEE GIFTS</td>
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<tr>
<td>FAI5804- Venue Physical</td>
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<td>FAI5850 - Partner Event</td>
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<td>FAI5901 - INSURANCE</td>
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<td>GEN5003 - Retirement</td>
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<td>GEN5007-Payroll Processing</td>
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<td>GEN5102-Transportation - Staff</td>
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<td>GEN5103-Meals - Staff</td>
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<td>GEN5106 General Transportation</td>
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<td>GEN5111-Meals - non-staff</td>
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<td>GEN5303-Video</td>
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<td>GEN5305-Email/Communications</td>
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<td>GEN5400-Continuing Education -</td>
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<td>GEN5405-Membership Dues/ Fees</td>
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</table>
### Form 990, Part IX, Line 24e (continued)

**Other Expenses**

<table>
<thead>
<tr>
<th>Description</th>
<th>(A) Total</th>
<th>(B) Program Services</th>
<th>(C) Management &amp; General</th>
<th>(D) Fundraising</th>
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</thead>
<tbody>
<tr>
<td>GEN5802 - Recognition Staff</td>
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<td>GEN5803 - Recognition Board</td>
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<td>GEN5804 Program Expenses</td>
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<td>INT5301 - Website</td>
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<td>INT5303 - Video</td>
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<td>INT5804 - Venue Physical</td>
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### Other Expenses

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<th>(A) Total</th>
<th>(B) Program Services</th>
<th>(C) Management &amp; General</th>
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<td>TRAN5111-Meals - non-staff</td>
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<td>TRAN5801- Event Attendee Gifts</td>
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<td>TRAN5804-Venue - Physical</td>
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<td>TRAN5850-Partner Events</td>
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<td><strong>Total</strong></td>
<td><strong>88,852.</strong></td>
<td><strong>41,721.</strong></td>
<td><strong>46,774.</strong></td>
<td><strong>357.</strong></td>
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</table>
**Form 8879-TE**

**IRS e-file Signature Authorization for a Tax Exempt Entity**

For calendar year 2021, or fiscal year beginning __7/01__ 2021, and ending __6/30__ 2022

- Do not send to the IRS. Keep for your records.
- Go to www.irs.gov/Form8879TE for the latest information.

**Part I | Type of Return and Return Information**

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not complete more than one line in Part I.**

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Amount</th>
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</thead>
<tbody>
<tr>
<td>1a</td>
<td>Form 990 check here...</td>
<td>X b Total revenue, if any (Form 990, Part VIII, column (A), line 12)</td>
</tr>
<tr>
<td>2a</td>
<td>Form 990-EZ check here...</td>
<td>X b Total revenue, if any (Form 990-EZ, line 9)</td>
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<tr>
<td>3a</td>
<td>Form 1120-POL check here</td>
<td>X b Total tax (Form 1120-POL, line 22)</td>
</tr>
<tr>
<td>4a</td>
<td>Form 990-PF check here...</td>
<td>X b Tax based on investment income (Form 990-PF, Part V, line 5)</td>
</tr>
<tr>
<td>5a</td>
<td>Form 8868 check here...</td>
<td>X b Balance due (Form 8868, line 3c)</td>
</tr>
<tr>
<td>6a</td>
<td>Form 990-T check here...</td>
<td>X b Total tax (Form 990-T, Part III, line 4)</td>
</tr>
<tr>
<td>7a</td>
<td>Form 4720 check here...</td>
<td>X b Total tax (Form 4720, Part III, line 1)</td>
</tr>
<tr>
<td>8a</td>
<td>Form 5227 check here...</td>
<td>X b FMV of assets at end of tax year (Form 5227, Item D)</td>
</tr>
<tr>
<td>9a</td>
<td>Form 5330 check here...</td>
<td>X b Tax due (Form 5330, Part II, line 19)</td>
</tr>
<tr>
<td>10a</td>
<td>Form 8038-CP check here...</td>
<td>X b Amount of credit payment requested (Form 8038-CP, Part III, line 22)</td>
</tr>
</tbody>
</table>

**Part II | Declaration and Signature Authorization of Officer or Person Subject to Tax**

Under penalties of perjury, I declare that

- X I am an officer of the above entity or  
- I am a person subject to tax with respect to (name of entity)

and that I have examined a copy of the 2021 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS an acknowledgement of receipt or reason for rejection of the transmission. (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

**PIN: check one box only**

- X I authorize Attolero, LLC ERO firm name to enter my PIN 96657 as my signature

on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return’s disclosure consent screen.

- As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return’s disclosure consent screen.

**Signature of officer or person subject to tax**

- Signature
- Date

**Part III | Certification and Authentication**

**ERO’s EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.**

<table>
<thead>
<tr>
<th>ERO’s signature</th>
<th>Robert Bales</th>
</tr>
</thead>
</table>

I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.