Form **990-PF**

Return of Private Foundation

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Foi	' calen	ndar year 2024 or tax year beginning	, 202	24, and	ending		, 20
Nan	ne of fou	indation			A Employe	er identification numb	er
Nun	nber and	d street (or P.O. box number if mail is not delivered to street address)	Roo	m/suite	B Telephor	ne number (see instruc	tions)
City	or town	, state or province, country, and ZIP or foreign postal code	<u>'</u>		C If exemp	tion application is pend	ding, check here .
G	Check	k all that apply: Initial return Initial return	n of a former public	charity	D 1. Foreig	ın organizations, check	here
		☐ Final return ☐ Amended				n organizations meetin	
_	011	Address change Name cha			-	here and attach comp	_
<u>н</u>		k type of organization:		ation		foundation status was 507(b)(1)(A), check here	
ı	Fair m	narket value of all assets at J Accounting method	d: 🗌 Cash 🔲 A	Accrual	F If the fou	ındation is in a 60-mon	th termination
		of year (from Part II, col. (c),			under se	ection 507(b)(1)(B), chec	ck here
_	line 16	6) \$ (Part I, column (d), mu	ust be on cash basis	s.)			
Р	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books		investment ncome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)					
	2	Check ☐ if the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities					
	5a	Gross rents					
	b	Net rental income or (loss)					
ne	6a	Net gain or (loss) from sale of assets not on line 10					
ē	_ b	Gross sales price for all assets on line 6a					
Revenue	7	Capital gain net income (from Part IV, line 2)		-			
ш	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances		-			
	b	Less: Cost of goods sold					
	11	Gross profit or (loss) (attach schedule) Other income (attach schedule)					
	12	Total. Add lines 1 through 11		+			
	13	Compensation of officers, directors, trustees, etc.					
xpenses	14	Other employee salaries and wages					
ŝuŝ	15	Pension plans, employee benefits					
ğ	16a	Legal fees (attach schedule)					
Ú	b	Accounting fees (attach schedule)					
<u>ĕ</u> .	С	Other professional fees (attach schedule)					
rat	17	Interest					
ist	18	Taxes (attach schedule) (see instructions)					
Ē	19	Depreciation (attach schedule) and depletion					
₫	20	Occupancy					
γp	21	Travel, conferences, and meetings					
a	22	Printing and publications					
βL	23	Other expenses (attach schedule)				1	
Operating and Administrative E	24	Total operating and administrative expenses. Add lines 13 through 23					
ğ	25	Contributions, gifts, grants paid					
_	26	Total expenses and disbursements. Add lines 24 and 25					
	27	Subtract line 26 from line 12:					
	а	Excess of revenue over expenses and disbursements					
	b	Net investment income (if negative, enter -0-)					
	C	Adjusted net income (if negative, enter -0-)					

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

Part	V Capital Gains an	d Losses for Tax on Investr	nent Income			. ago c
	(a) List and describe the k	ind(s) of property sold (for example, real euse; or common stock, 200 shs. MLC Co.	estate,	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a						
b						
С						
d						
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		ain or (loss) s (f) minus (g))
а						
b						
С						
d						
е						
	Complete only for assets she	owing gain in column (h) and owned	by the foundation	on 12/31/69.	(I) Gains (C	ol. (h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col. (i) (j), if any		ot less than -0-) or (from col. (h))
а						
b						
С						
d						
е						
2	Capital gain net income of		also enter in Pa), enter -0- in Par		2	
3	If gain, also enter in Par	in or (loss) as defined in sections t I, line 8, column (c). See instr	uctions. If (loss),		3	
Part	V Excise Tax Base	d on Investment Income (Se	ection 4940(a).	4940(b), or 49	948 – see instru	uctions)
1a		ons described in section 4940(d)(2)		• • • •		
	Date of ruling or determinat		copy of letter if n			1
b		ations enter 1.39% (0.0139) of li	ne 27b. Exempt	foreign organiza		
2	Tax under section 511 (do	omestic section 4947(a)(1) trusts a	and taxable found	lations only: othe	ers enter -0-)	2
3	Add lines 1 and 2				· · · · · ·	3
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)					4
5	, , ,	nt income. Subtract line 4 from		•	· · · —	5
6	Credits/Payments:		0 2010 01 .			
а		nents and 2023 overpayment cre	edited to 2024	6a		
b		ions—tax withheld at source .			_	
C		for extension of time to file (For				
d		neously withheld				
7	-	nts. Add lines 6a through 6d				7
8	• •	derpayment of estimated tax. Ch				8
9		ies 5 and 8 is more than line 7, e				9
10		more than the total of lines 5 ar				0
11	• •	10 to be: Credited to 2025 estin		-		1
	Lintol the amount of life	io to be. Credited to 2023 estill	iateu tax	n	cidilucu · I	•

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Part	VI-A Statements Regarding Activities		-	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.			
С	Did the foundation file Form 1120-POL for this year?	1c		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. \$ (2) On foundation managers. \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		
	If "Yes," attach a detailed description of the activities.	_		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .	3		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	7		
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2024 or the tax year beginning in 2024 ? See the instructions for Part XIII. If "Yes," complete Part XIII.			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	9		
10	names and addresses	10		
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		
13	Website address			
14	The books are in care of Telephone no			
	Located at ZIP+4			<u></u>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2024 , did the foundation have an interest in or a signature or other authority		Yes	No
. •	over a bank, securities, or other financial account in a foreign country?	16	. 55	
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country			
		- 00	Λ DE	(000.4)

Form 990-PF (**2024**)

Part	VI-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1a(1)		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified			
		1a(2)		
		1a(3)		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or			
		1a(5)		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation			
	agreed to make a grant to or to employ the official for a period after termination of government service, if			
		1a(6)		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in			
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
С	Organizations relying on a current notice regarding disaster assistance, check here			
d	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2024?	1d		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2024 , did the foundation have any undistributed income (Part XII, lines 6d and 6e) for			
	tax year(s) beginning before 2024 ? If "Yes," list the years	2a		
_	20, 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
0-	20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
		3a		
b	If "Yes," did it have excess business holdings in 2024 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the			
	foundation had excess business holdings in 2024 .)	Ole		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable	3b		
4a	purposes?	4-		
		4a		
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning			
	in 2024?	4h		
		4b) DE	/·

Form 990-PF (2024) Page 6 Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required (continued) Yes No **5a** During the year, did the foundation pay or incur any amount to: (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? 5a(1) (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or 5a(2) (3) Provide a grant to an individual for travel, study, or other similar purposes? . . . 5a(3) (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d) 5a(4) (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for 5a(5) If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions 5b If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it 5d If "Yes," attach the statement required by Regulations section 53.4945-5(d). Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 6a Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6h If "Yes" to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7a If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? . Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and List all officers, directors, trustees, and foundation managers and their compensation. See instructions. (c) Compensation (If not paid, enter -0-) (b) Title, and average (d) Contributions to (e) Expense account, (a) Name and address employee benefit plans hours per week other allowances devoted to position and deferred compensation Compensation of five highest-paid employees (other than those included on line 1-see instructions). If none, enter "NONE." (d) Contributions to (b) Title, and average employee benefit plans and deferred (e) Expense account, other allowances (c) Compensation (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position compensation

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

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Part VII Contractors (continued) Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation **Total** number of others receiving over \$50,000 for professional services **Summary of Direct Charitable Activities** Part VIII-A List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of Expenses organizations and other beneficiaries served, conferences convened, research papers produced, etc. 2 Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount 2 All other program-related investments. See instructions. **Total.** Add lines 1 through 3

Part	Minimum Investment Return (All domestic foundations must complete this part. Forei	gn fo	undations, see
	instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see		
	instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	
6	Minimum investment return. Enter 5% (0.05) of line 5	6	
Part		ounda	ations
	and certain foreign organizations, check here $\ \square$ and do not complete this part.)		
1	Minimum investment return from Part IX, line 6	1	
2a	Tax on investment income for 2022 from Part V, line 5		
b	Income tax for 2022. (This does not include the tax from Part V.) 2b		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1 .	7	
Part	XI Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	
b	Program-related investments—total from Part VIII-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
_	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4	4	5 000 DE 1500
			Form 990-PF (2024)

Part	XII Undistributed Income (see instruction	ons)			
		(a) Corpus	(b) Years prior to 2023	(c) 2023	(d) 2024
1	Distributable amount for 2024 from Part X, line 7				
2	Undistributed income, if any, as of the end of 2024 :				
а	Enter amount for 2022 only				
b	Total for prior years: 20, 20, 20				
3	Excess distributions carryover, if any, to 2024 :				
а	From 2019				
b	From 2020				
С	From 2021				
d	From 2022				
е	From 2023				
f	Total of lines 3a through e				
4	Qualifying distributions for 2024 from Part XI, line 4: \$				
а	Applied to 2022, but not more than line 2a .				
b	Applied to undistributed income of prior years				
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2024 distributable amount				
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2024				
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b	Prior years' undistributed income. Subtract line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable amount—see instructions				
е	Undistributed income for 2022. Subtract line				
	4a from line 2a. Taxable amount-see				
	instructions				
f	Undistributed income for 2024. Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2024				
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
_	required—see instructions)				
8	Excess distributions carryover from 2018 not				
_	applied on line 5 or line 7 (see instructions) .				
9	Excess distributions carryover to 2024. Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:				
а	Excess from 2020				
b	Excess from 2021				
С	Excess from 2022				
d	Excess from 2023				
е	Excess from 2024				

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Part					9)	
1a	If the foundation has received a ruling					
h	foundation, and the ruling is effective fo		_			(2) or 4049(i)(E)
b 2a	Check box to indicate whether the four Enter the lesser of the adjusted net	Tax year		Prior 3 years	Section 4942(j)((3) or
_u	income from Part I or the minimum investment return from Part IX for	(a) 2024	(b) 2023	(c) 2022	(d) 2021	(e) Total
	each year listed					
C	85% (0.85) of line 2a					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test-enter:					
	(1) Value of all assets					
b	section 4942(j)(3)(B)(i)					
_	Part IX, line 6, for each year listed					
С	"Support" alternative test—enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Part		•	•	he foundation	nad \$5,000 or m	ore in assets at
1	any time during the year- Information Regarding Foundation		15.)			
a	List any managers of the foundation before the close of any tax year (but of	who have contribu				by the foundation
b	List any managers of the foundation ownership of a partnership or other en					rge portion of the
2	Information Regarding Contribution Check here ☐ if the foundation or unsolicited requests for funds. If the f complete items 2a, b, c, and d. See ir	nly makes contrit oundation makes	outions to presele	ected charitable	•	
а	The name, address, and telephone nu		dress of the perso	on to whom applic	ations should be a	ddressed:
b	The form in which applications should	d be submitted and	d information and	materials they sh	ould include:	
С	Any submission deadlines:					
d	Any restrictions or limitations on av factors:	vards, such as b	y geographical a	reas, charitable f	ïelds, kinds of ins	titutions, or other

	Part XIV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment					
3				ture Payment		
	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount	
	Name and address (home or business)	or substantial contributor	recipient	Contribution		
а	Paid during the year					
			0			
			0			
	Total			3a		
b	Approved for future payment		0			

Pa	irt XV	-A Analysis of Income-Producing Ac	ctivities				
Ente	er gros	s amounts unless otherwise indicated.	Unrelated bu	usiness income	Excluded by sect	ion 512, 513, or 514 (d)	Related or exempt
1	Progi	ram service revenue:	Business code	Amount	Exclusion code	Amount	function income (See instructions.)
	a _						
	b _						
	c –						
	d _ e						
	f –						
	g F	ees and contracts from government agencies					
2	-	bership dues and assessments					
3		est on savings and temporary cash investments					
4		ends and interest from securities					
5	Net r	ental income or (loss) from real estate:					
		ebt-financed property					
		ot debt-financed property					
_		ental income or (loss) from personal property					
7		r investment income					
8		or (loss) from sales of assets other than inventory					
9 10		ncome or (loss) from special events s profit or (loss) from sales of inventory					
11		, , ,					
•	b						
	c –						
	d						
	е _						
		otal. Add columns (b), (d), and (e)					
						13	
		sheet in line 13 instructions to verify calculation					
	rt XV	-				d Comment and the first the	Palana
Lin	e No.	Explain below how each activity for which incomof the foundation's exempt purposes (other than					e accomplishmen
		h h h h h h	3 1		(,	

Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Part XVI **Organizations** Yes Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political Transfers from the reporting foundation to a noncharitable exempt organization of: 1a(1) 1a(2) Other transactions: (1) Sales of assets to a noncharitable exempt organization . . . 1b(1) (2) Purchases of assets from a noncharitable exempt organization . 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) 1b(5) (6) Performance of services or membership or fundraising solicitations . . . 1b(6) Sharing of facilities, equipment, mailing lists, other assets, or paid employees If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (c) Name of noncharitable exempt organization (b) Amount involved (d) Description of transfers, transactions, and sharing arrangements Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? Yes No **b** If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Sign May the IRS discuss this return with the preparer shown below? Here See instructions. Yes No Signature of officer or trustee Title Date Print/Type preparer's name Preparer's signature Date PTIN Check if **Paid**

Preparer

Use Only

Firm's name

Firm's address

self-employed

Firm's EIN

Phone no.

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2024

Employer identification number

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

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

Name of organization

Employer identification number

Part I	Contributors (see instructions). Use duplicate co	oies of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of the organization	Employer identification number

Name of the organization	Employer identification number

Name of the organization	Employer identification number

Name of the organization	Employar identification number
Name of the organization	Employer identification number

Form **8453-TE**

Tax Exempt Entity Declaration and Signature for Electronic Filing

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

For calendar year 2024, or tax year beginning JAN 01 , 2024, and ending DEC 31 For use with Forms 990, 990-EZ, 990-PF, 990-T, 1120-POL, 4720, 8868, 5227, 5330, and 8038-CP

Go to www.irs.gov/Form8453TE for the latest information. Name of file JESUS CHRIST COMPASS MINISTRIES INC 82-1445213 Type of Return and Return Information Part I Check the box for the type of return being filed with Form 8453-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 of 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-). 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. 1a Form 990 check here . . **b Total revenue,** if any (Form 990, Part VIII, column (A), line 12) . . . 2b **b Total revenue,** if any (Form 990-EZ, line 9) 2a Form 990-EZ check here . 3a Form 1120-POL check here 3b 4b 4a Form 990-PF check here . **b** Tax based on investment income (Form 990-PF, Part V, line 5) 0 Form 8868 check here . . **b Balance due** (Form 8868, line 3c) 5a **b Total tax** (Form 990-T, Part III, line 4) 6b Form 990-T check here **b Total tax** (Form 4720, Part III, line 1) Form 4720 check here . . 7b 7a Form 5227 check here . . **b FMV** of assets at end of tax year (Form 5227, Item D) . . . 8b **b Tax due** (Form 5330, Part II, line 19) 9b Form 5330 check here . . 9a П 10a Form 8038-CP check here **b** Amount of credit payment requested (Form 8038-CP, Part III, line 22) 10b **Declaration of Officer or Person Subject to Tax** Part II 11a ☐ I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) 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. If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/ 990-PF (as specifically identified in Part I above) to the selected state agency(ies). Under penalties of perjury, I declare that 🗸 I am an officer of the above named entity or 🗖 I am the person subject to tax with respect to (name of entity) JESUS CHRIST COMPASS MINISTRIES INC , (EIN) 82-1445213 and that I have examined a copy of the 2024 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 (a) 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. Sign 08/23/2025 CEO Here Signature of officer or person subject to tax Title, if applicable Date Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions) I declare that I have reviewed the above return and that the entries on Form 8453-TE are complete and correct to the best of my knowledge. If I am only a collector. I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The entity officer or person subject to tax will have signed this form before I submit the return. I will give a copy of all forms and information to be filed with the IRS to the officer or person subject to tax, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns, If I am also the Paid Preparer, under penalties of periury I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge. Date ERO's SSN or PTIN Check if also Check if self-ERO's ERO's paid preparer employed signature Use Firm's name (or yours if self-employed), address, and ZIP code Only Phone no. Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge. Print/Type preparer's name Preparer's signature Date Check if self-Paid employed **Preparer** Firm's EIN Firm's name

Phone no.

Use Only

Firm's address