## Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

Α	For the	2022 calendar year, or tax year beginning	and	ending		
В	Check if applicable	C Name of organization			D Employer identifi	cation number
	Addre	NELLIE MAE EDUCATION FOUN	DATION. INC.			
	Name chang				04-27553	23
	Initial return	Number and street (or P.O. box if mail is not delivered		Room/suite		
	∏Final return/	1250 HANCOCK STREET		701N	781-348-	
	termin ated		foreign postal code		G Gross receipts \$	292,272,748.
	Ameno	QUINCY, MA UZ109			H(a) Is this a group re	
	Application pendir		L CAREY		for subordinates	? Yes X No
_		SAME AS C ABOVE			H(b) Are all subordinates in	ncluded? Yes No
<u>1</u>	Tax-exe		nsert no.) 4947(a)(1)	or 52	7 If "No," attach a	list. See instructions
	Websit				H(c) Group exemption	
		organization: X Corporation Trust Associat	ion Other	L Yea	r of formation: 1998  I	M State of legal domicile: MA
P	art I	Summary				
ø	1	Briefly describe the organization's mission or most signif				
Governance		PRIORITIZE COMMUNITY GOALS T				
er n	2	Check this box if the organization discontinue			A	
Š	3	Number of voting members of the governing body (Part			3	14
8	4	Number of independent voting members of the governin				14
es	5	Total number of individuals employed in calendar year 20				24
Activities &	6	Total number of volunteers (estimate if necessary)				0
Act	7 a	Total unrelated business revenue from Part VIII, column				300,515.
_	b	Net unrelated business taxable income from Form 990-T	, Part I, line 11	·····	Prior Year	Current Year
		0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			100,000.	
e	8	_			0.	700,000.
Revenue	9		7 -11		94,484,276.	22,548,571.
Be	10	Investment income (Part VIII, column (A), lines 3, 4, and			0.	0.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 1			94,584,276.	23,248,571.
_		Total revenue - add lines 8 through 11 (must equal Part )			14,455,349.	17,813,997.
		Grants and similar amounts paid (Part IX, column (A), line			0.	0.
		Benefits paid to or for members (Part IX, column (A), line			5,311,401.	4,687,634.
ses	15	Salaries, other compensation, employee benefits (Part IX Professional fundraising fees (Part IX, column (A), line 11			0.	0.
Expenses	loa		e)	0.	<u></u>	0.
ă	17	Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-2	40)		3,522,651.	3,826,133.
	''	Total expenses. Add lines 13-17 (must equal Part IX, colu			23,289,401.	26,327,764.
		Revenue less expenses. Subtract line 18 from line 12			71,294,875.	-3,079,193.
	4	nevenue less expenses. Subtract line 10 from line 12		В	eginning of Current Year	End of Year
its c	20	Total assets (Part X, line 16)			585,493,964.	483,194,914.
ASSE	21	Total liabilities (Part X, line 10)			17,222,833.	14,080,549.
Net Assets or	22	Net assets or fund balances. Subtract line 21 from line 2	 N		568,271,131.	469,114,365.
P	art II	Signature Block				
Und	ler pena	Ities of perjury, I declare that I have examined this return, includ	ing accompanying schedule	s and staten	nents, and to the best of my	/ knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is b	ased on all information of w	hich prepare	r has any knowledge.	,
Sig	n	Signature of officer			Date	
He		MICHAEL CAREY, VP FOR FINAN	& ADMIN/TREAS	SURER		
		Type or print name and title				
	<u> </u>	Print/Type preparer's name Prep	er's signature		Date Check Check	PTIN
Pai	d	CRAIG KLEIN	m) Cui		11/15/23 self-employ	
Pre	parer	Firm's name CBIZ MHM, LLC	Δ		Firm's EIN 2	6-3753134
Use	Only	Firm's address 500 BOYLSTON STREET	9			
_		BOSTON, MA 02116			Phone no. 61	7-761-0600
Ма	y the IF	RS discuss this return with the preparer shown above? S	ee instructions			X Yes No

. u	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
-	THE MISSION OF THE FOUNDATION IS TO CHAMPION EFFORTS THAT PRIORITIZE	
	COMMUNITY GOALS THAT CHALLENGE RACIAL INEQUITIES AND ADVANCE	
	EXCELLENT, STUDENT-CENTERED PUBLIC EDUCATION FOR ALL NEW ENGLAND	
	YOUTH. THE FOUNDATION IS ORGANIZED AND OPERATED AS A MASSACHUSETTS	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	X 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?	<u>K</u> No
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 \$21,993,799 • including grants of \$17,813,997 • ) (Revenue \$	)
	THE NELLIE MAE EDUCATION FOUNDATION ("FOUNDATION") STRATEGY IS	
	INCLUSIVE OF GRANTMAKING, BUILDING THE CAPACITY AND SUSTAINABILITY OF	
	ORGANIZATIONS AND SCHOOLS THAT WORK TO PROMOTE RACIAL EQUITY IN PUBLIC	2
	EDUCATION, PARTNERSHIPS AND ADVOCACY EFFORTS, AS WELL AS OTHER	
	SUPPORTING ACTIVITIES. OUR GRANTMAKING ENCOMPASSES FOUR CORE FUNDS	
	STRUCTURED TO REINFORCE ONE ANOTHER IN ADVANCING OUR MISSION AND	
	COMBATTING ANTI-BLACK STRUCTURAL RACISM. ADDITIONALLY, AS PART OF OUR	₹
	CORE GRANT FUNDS, THE FOUNDATION PROVIDES A ROBUST LEARNING COMMUNITY	
	AND CAPACITY BUILDING SUPPORTS.	
	SEE SCHEDULE O FOR CONTINUATION OF PROGRAM SERVICE ACCOMPLISHMENTS.	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$	)
4c	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$	)
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$ )	
4e	Total program service expenses 21,993,799.	) (2022)
	Form 330	・レンノノ)

## Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
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	3		X
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	4	X	
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
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	6		X
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	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
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	9		X
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	10		X
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
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	11b	X	
С	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	11c		X
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	11d		<u>X</u>
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
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	11f	_X_	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		7.7	
	Schedule D, Parts XI and XII	12a	_X_	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			\ <b>.</b>
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b				
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		v	
4-	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	_
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	4-		. v
46	foreign organization? If "Yes," complete Schedule F, Parts II and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		X
16		46		х
17	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV  Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		<u> </u>
"	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	<b> </b> ''		<del></del>
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	"		<del></del>
.5	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
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	21	Х	

# Form 990 (2022) NELLIE MAE EDUCATION FOUNDATION, INC. Part IV | Checklist of Required Schedules (continued)

22 X  23 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part X, comment A in 1972 of Yes, "complete Schedule   Parts   and \$1.0 compensation of the organization a current and former officers, directions, frustees, key employees, and highest compensated employees? If Yes," complete Schedule   Parts   And 20 th 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," arrawer lines 2th through 2th and complete Schedule K If Yeb, 'go to line 25a   24a		Continued)		Vaa	Na
Part IX. Column (A), line 2? (ii 'res,' complete Schedule I, Parts I and III 2   IX 2   IX 2   IX 1	22	Did the examination report more than \$5,000 of grants or other assistance to exfer demostic individuals on		Yes	No
23 DU the organization answer "Yes" to Part VII. Section A, Ilin 3, 4, or 5, about compensation of the organization's current and former officers, directors, furstees, key employees, and highest compensated employees? If "Yes," complete Schedule I.  24 DU 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 24 th though 24 and complete Schedule K. If "Yos," or time 25a  25 DU the organization marks are proceeds of tax exempt bonds beyond a temporary period exception?  26 DU the organization animation an escrow account other than a refunding secrow at any time during the year to defease any tax exempt bonds?  26 DU the organization as as an "on behalf of issuer for bonds outstanding at any time during the year?  27 DU the organization as as an "on behalf of issuer for bonds outstanding at any time during the year?  28 Section 90(15), 901(4)(4), and 901(4)(29) organizations. Did the organization are property to the organization are property to the organization are property organization. A section of property organization are associated on any of the organizations proper forms 990 or 990 \$22" If Yes, "complete Schedule L. Part II  28 DU the organization property are amount on Part X, line 5 or 22 for reconveibles from or payables is any oursent or former officer, director, fusities, key employee, creator or former, substantial contributor in 25x controlled ontity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III  28 Was the organization provide a grant or other assistance to any oursent or former officer, director, fusities, key because the following parties (section \$1, Part III  29 DU the organization former officer, directo	22		22		x
and former officers, directions, flustees, key employees, and highest compensated employees? If "Yes," complete Schedule I, Part IV.  23 X  24a Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$10,000 as of the last day of the yea, that was sixued after December 31, 2002? If "Yes," answer fines 24b through 24d and complete Schedule IV. If "No." go to life 25s.  24b Did the organization maintain an accrow account other than a refunding series at yit time during the year to defeate any tax exempt bonds?  25c Section \$01(5(3), \$01(6)(4), and \$51(5)(29) organizations. Did the organization engage in an excess sherift transaction with a disqualified person during the year?  25c Section \$01(5(3), \$01(6)(4), and \$51(5)(29) organizations. Did the organization engage in an excess sherift transaction with a disqualified person in a princy year, and that the transaction have a disqualified person in a princy year, and that the transaction have not been proported on any aff I' I' Yes, 'complete Schedule I, Part I'.  25c 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 or three persons? I' Yes, 'complete Schedule I, Part II'.  25d Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or former officer, director, trustee, k	23				
Schedule / Late to deep complete schedule / Late to descent to the year, that was issued after December 31, 2002? // "Yes," answer lines 24b through 24d and complete Schedule K. If "No." go to line 25a.  b Did the organization markaria an escrive account other than a refunding secret and the organization markaria an escrive account other than a refunding secret and the grant and secret and se	20				
24a Dut 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," arrawer lines 24b through 24d and complete Schedule K. If "No." go to hire 25a.  b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  24d Did the organization marianian an accrow account other than a refunding secrow at any time during the year to defeative any tax-exempt bonds?  24d Did the organization aware that it engaged for the complex schedule L. Part I  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 in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction was not been reported on any of the organizations prior Forms 990 or 990 E27 If "Yes," complete Schedule L, Part I  25b Did the organization provide a grant or other assistance to any current or former officer, director, instead, key employee, creator or founder, substantial contributor in 39%.  27 To Did the organization provide a grant or other assistance to any current or former officer, director, instead, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 39% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II  28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part II)  29 Use the organization of papiclase limit prehebids, 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 III  29 Did the organization receive more than 252,000 in non cash controlled one seed to any carrier organization exelled as a party individual described in line 28a If "Yes," compl		· · ·	23	х	
stated with the year, that was issued after December 31, 2002?   If "Yes," answer lines 24b through 24d and complete Schedule K. If "No." go to fine 25s.  b Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?  c Did the organization minest any proceeds of tax exempt bonds beyond a temporary period exception?  d Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  d Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year?  d Did the organization and that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I   25a   X    15b Is the organization aware that it engaged in an excess benefit transaction has not been reported on any of the organization's prior Forms 980 or 990-527   "Yes," complete Schedule I, Part I   25b   X    25c 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, frustee, key employee, creator or founder, substantial contributor or entity or family minember of any of these persons? If "Yes," complete Schedule I, Part IV   25c   X    27c Did the organization provide a grant or other assistance to any current or former officer, director, frustee, key employee, creator or founder, substantial contributor or entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule I, Part IV   25c   X   X    28d Was the organization figure state of the substance of any officer director, frustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule I, Part IV   25c   X   X    Did the organization figure the substance of any officer of the following parties goes the Schedule I, Part IV   25c   X   X    Did the organization figu	24a				
Schedule K. If "No." go to line 25a					
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  d Did the organization and at as an 'on behalf of' Issuer for bonds outstanding at any time during the year?  246  258 Section 50(16)(3), 50(16)(4), and 50(16)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? "Yes," complete Schedule I, Part I  b is the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? "Yes," complete Schedule I, Part I  b is the organization have a been reported on any of the organization's prior Forms 990 or 990-E2? "H"'vis," complete Schedule I, Part I  250  260 bit the organization provid any amount on Part X, line 5 or 22, for receivables from or payables to party current or former officer, director, frustase, key employee, creator or former officer, or order of sample schedule in the part II is a subject to a first proper of family member of any of these persons? If "Yes," complete Schedule L, Part II			24a		Х
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-evempt bonds?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  22a Section 501(a)(3), 501(c)(a) and 501(c)(20) organizations. Did the organization engage in an excess binefit transaction with a disqualified person of unity they year? If "yes," complete Schedule I., Part I	b		24b		
d Did the organization act as an 'on behalf of 'issuer for bonds outstanding at any time during the year?  25a Saction 501(28), 501(64), 4an 501(62)92 organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I  25a 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 is prior Forman 590 or 1996 27°, 'Yes, 'Complete Schedule L, Part I  25b Did 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 sport or prior and that the transaction and the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction and the transaction with a disqualified person in a prior year, and that the transaction with one of the following controlled entity froutions are officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 53% controlled entity froution a party to a business transaction with one of the following parties (see the Schedule L, Part III)  28 Was the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part IV)  29 Did the organization receive more than \$25,000 in non-east contributions? If "Yes," complete Schedule I, Part IV   280   X   X   X   X   X   X   X   X   X					
d Did the organization act as an 'on behalf of 'issuer for bonds outstanding at any time during the year?  25a Saction 501(28), 501(64), 4an 501(62)92 organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I  25a 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 is prior Forman 590 or 1996 27°, 'Yes, 'Complete Schedule L, Part I  25b Did 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 sport or prior and that the transaction and the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction and the transaction with a disqualified person in a prior year, and that the transaction with one of the following controlled entity froutions are officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 53% controlled entity froution a party to a business transaction with one of the following parties (see the Schedule L, Part III)  28 Was the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part IV)  29 Did the organization receive more than \$25,000 in non-east contributions? If "Yes," complete Schedule I, Part IV   280   X   X   X   X   X   X   X   X   X		any tax-exempt bonds?	24c		
b 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 990-87. If Yes, "complete Schedule I, Part I	d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
b 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 980 or 990 £27°, 11°, 12°s, *complete Schedule L, Part I	25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? # "Yes," complete Schedule L, Part I    25 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    26 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    28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part III    28 Was the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part III    28 A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule II. Part III    28 A 28 X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule II. Part III    28 A 28 X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule II. Part III    29 X  30 Did the organization liquidate, terminate, or dissolve and case operations? If "Yes," complete Schedule II. Part III    30 X  31 Did the organization own 100% of an entity dissegarded as separate from the organization under Regulations sections 301.77012 and 301.77013 If "Yes," complete Schedule II. Part II    31 X  32 Was the organization own 100% of an entity dissegarded as separate from the organization under Regulations sections 301.77012 and 301.77013 If "Yes," complete Schedule II. Part III    34 X  35 Did the orga		transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
Schedule L, Part I  250 Id 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  26	b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
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 26 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 II 27 X  28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV 28 A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28 X  28 A SW controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV 28c X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X  30 Did the organization receive wome than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part I 31 X  31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 31 X  32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I, II 32 X  33 Did the organization related to any tax-exempt or tax-bell entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1 34 X  34 Was the organization neale a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iine 2 35 X  35 Did the organization on complete Schedule R, Part V, Iine 2 36 X  36 Section 501(c)(3) organizations. Did		that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
controlled entity or family member of any of these persons? If "Yes," complete Schedule I., Part II 27 X  28 Was 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 I., Part III 27 X  28 Was the organization a party to a business transaction with one of the following parties (see the Schedule I., Part IIV, instructions for applicable fliing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule I., Part IV 28b X  28 A Six C A 35% controlled entity of one or more individuals andror organization selectived in line 28a or 28b 7 If "Yes," complete Schedule I., Part IV 28c X  29 Use the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X  31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 31 X  32 Did the organization one 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, III, or IV, and Part V, Iline 1 34 X  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iline 2 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iline 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable rela		Schedule L, Part I	25b		_X_
controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II   20   27   28   27   29   27   28   28   27   28   29   28   29   29   29   29   29	26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
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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? // "Yes," complete 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   288   X			26		<u> </u>
entitly (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part IV.  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.  28b X.  b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.  28b 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.  28c X.  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.  29 X.  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.  30 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.  31 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1  33 Did the organization have a controlled entity within the meaning of section 512(b)(13)?  34 Was the organization have a controlled entity within the meaning of section 512(b)(13)?  35 Did the organization on the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?  35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  36 Section 501(c)(3) organizations or 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 Sc	27				
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.  b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.  28a X  28b 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.  28c X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. Part IV.  29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. 30 X  30 Did the organization iliquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.  30 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.  31 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 II.  31 Sa Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, IIne 1  32 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, IIne 2  33 Did the organization conduct more than 5% of its activities through an entity that is not a related organization? If "Yes," complete Schedule R, Part V, IIne 2  33 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, IIne 1  34 Did the organization complete Schedule O and provide explanations on Schedule O and provide explanations on Schedule O for Part VI, IIn					
instructions for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? ##  *Yes, "complete Schedule L, Part IV.  b A family member of any individual described in line 28a? ## *Yes, "complete Schedule L, Part IV.  28b X  28b X  28b X  28c X  29 Did the organization receive more than \$25,000 in non-cash contributions? ## *Yes, "complete Schedule M. Part IV.  29 J X  30 Did the organization receive more than \$25,000 in non-cash contributions? ## *Yes, "complete Schedule M. 29 J X  31 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? ## *Yes, "complete Schedule M. 30 X  31 Did the organization iliquidate, terminate, or dissolve and cease operations? ## *Yes, "complete Schedule N, Part II. 31 J X  32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? ## *Yes," complete Schedule N, Part II. 31 J 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? ## *Yes," complete Schedule R, Part II, III, or IV, and Part V, IIne 1 34 J X  34 Was the organization related to any tax-exempt or taxable entity? ## *Yes," complete Schedule R, Part II, III, or IV, and Part V, IIne 1 35a, did the organizations celeve any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? ## *Yes," complete Schedule R, Part V, IIne 2 35b  35a Section 501c(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? ## *Yes," complete Schedule R, Part V, IIne 2 35b  35b Section 501c(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? ## *Yes," complete Schedule R, Part V, IIne 2 35b  36 Section 501c(3) organizations complete Schedule R P, Part V, IIne 2 35b  3			27		<u> </u>
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor?   "Yes," complete Schedule L, Part IV	28				l
"Yes," complete Schedule L, Part IV  b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV  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  28c X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I  30 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I  31 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  31 Did 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  32 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  32 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  33 Extension 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  34 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O an					
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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  28c X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  29 X  30 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  30 X  31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I  31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I  32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  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 I  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, Iine 1  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  35b 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)?  35a 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, Iine 2  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, Iine 2  36 Section 501(c)(3) organizations of Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O  27 Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  28 In Enter the number reported i					
"Yes," complete Schedule L, Part IV  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  29 X  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  30 X  31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I  31 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  31 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 II  32 X  33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part III, III, or IV, and Part V, line 1  34 X  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  35b 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  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  36 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  37 Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  10 Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  11 Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  12 b Id the organization comply with backup			28b		
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contributions? If "Yes," complete Schedule M 30			29		
Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	30		30		х
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sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33	33		<u> </u>		
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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  38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O  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  10 In Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  10 In Enter the number of Portable payments to vendors and reportable gaming (gambling) winnings to prize winners?	36	• • • • • • • • • • • • • • • • • • • •			
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  37 X  38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O  Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  10 In Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable  11 In India		If "Yes," complete Schedule R, Part V, line 2	36		X
Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O  Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  The image of the complete Schedule O contains a response or note to any line in this Part V  The image of the complete Schedule O complete Schedule O  The image of the complete Schedule O complete Schedule O  The image of the complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  The image of the complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  The image of the complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  The image of the complete Schedule O for Part VI, lines 11b and 19?  The image of the complete Schedule O for Part VI, lines 11b and 19?  The image of the complete Schedule O for Part VI, lines 11b and 19?  The image of the complete Schedule O for Part VI, lines 11b and 19?  The image of the complete Schedule O for Part VI, lines 11b and 19?  The image of the complete Schedule O for Part VI, lines 11b and 19?  The image of the complete Schedule O for Part VI, lines 11b and 19?  The image of the complete Schedule O for Part VI, lines 11b and 19?  The image of the complete Schedule O for Part VI, lines 11b and 19?  The image of the complete Schedule O for Part VI, lines 11b and 19?  The image of the complete Schedule O for Part VI, lines 11b and 19?  The image of the complete Schedule O for Part VI, lines 11b and 19?  The image of the complete Schedule O for Part VI, lines 11b and 19?  The image of the complete Schedule O for Part VI, lines 11b and 19?  The image of the complete Schedule O for Part VI, lines 11b and 19?  The image of the complete Schedule O for Part VI, lines 11b and 19?  The image of the complete Schedule O for Part VI, lines 11b and 19?  The image of the complete Sche	37				
Note: All Form 990 filers are required to complete Schedule O  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  b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming  (gambling) winnings to prize winners?  38 X  Yes No  1a Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  1b 0  1c X		and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		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  Yes No  1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  1c X	38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
Check if Schedule O contains a response or note to any line in this Part V  Yes No  1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable  b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  1c X			38	X	
Ta Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable  b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  Yes No  Yes No  1a	Pai				
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable     1a     59       b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable     1b     0       c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?     1c     X		Check if Schedule O contains a response or note to any line in this Part V			
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		1 1		Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming  (gambling) winnings to prize winners?  1c X					
(gambling) winnings to prize winners?		Effect the number of Forms wize included of fine rat. Effect of inforcephicable			
	С			v	
					(0000)

Form 990 (2022)

NELLIE MAE EDUCATION FOUNDATION, INC.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

	. (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		100	110
	filed for the calendar year ending with or within the year covered by this return  24			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	Х	
	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)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		_X_
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		_X_
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
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?	6a		_X_
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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?	7a		<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		<u>X</u>
d	If "Yes," indicate the number of Forms 8282 filed during the year			77
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u>X</u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<u>X</u>
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
0	sponsoring organization have excess business holdings at any time during the year?	8		
9 a	Sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the appropriate appropriation makes a distribution to a description of the appropriate	9b		
10	Section 501(c)(7) organizations. Enter:	30		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	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?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.			
b	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			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u>X</u>
45 b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			v
	excess parachute payment(s) during the year?	15		<u> </u>
40	If "Yes," see the instructions and file Form 4720, Schedule N.	40		v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		<u> </u>
17	If "Yes," complete Form 4720, Schedule O.  Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			
	ii 100, complete i diii 0000.			

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	4		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b1	4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	. 4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	. 5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		<u> X</u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			l
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	. 9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	37	├
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		X	<del>                                     </del>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	. 12b	X	<del>                                     </del>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		3.7	
	on Schedule O how this was done	12c	X	├─
13	Did the organization have a written whistleblower policy?	13	X	-
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45-	Х	
	The organization's CEO, Executive Director, or top management official	15a	X	$\vdash$
D	Other officers or key employees of the organization	15b	Λ	
16-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
Ioa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	16a		х
h	taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	104		122
b	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	100	ı	
17	List the states with which a copy of this Form 990 is required to be filed MA			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)	3)s only)	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.	,- <del>-</del> y)		
	X       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, a	nd finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	MICHAEL CAREY - 781-348-4271			
	1250 HANCOCK STREET 701N OUTNCY MA 02169			

Form **990** (2022)

## 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

- 1a 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- 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.

(A)	(B)	I	IIIZa		C)	ірсі	Jac	(D)	(E)	(F)
Name and title	Average			Pos	itior			Reportable	Reportable	Estimated
Tame and the	hours per					than o		compensation	compensation	amount of
	week	offic	cer ar	nd a d	irecto	r/trus	tee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	or dir	ao			rted		organization	(W-2/1099-MISC/	from the
	related	stee	truste		eo	bens		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	nal tru	ional		ploye	t com		1099-NEC)		and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) NICHOLAS C. DONOHUE	0.00	=	=	0	~	Ξ 5	<u>-</u>			
FORMER PRESIDENT & CEO							х	530,748.	0.	25,429.
(2) GISLAINE NGOUNOU	40.00							,	-	
INTERIM PRESIDENT & CEO				Х				466,494.	0.	57,876.
(3) MICHAEL CAREY	40.00									
VP FOR FINANCE & ADMIN, TREASURER				X				306,698.	0.	67,196.
(4) JESSICA SPOHN	40.00									
DIRECTOR OF GRANTMAKING						X		227,911.	0.	56,369.
(5) DELIA ARELLANO-WEDDLETON	40.00								_	
DIR. OF ENGAGEMENT & PARTNERSHIPS						X		203,378.	0.	51,962.
(6) NINA CULBERSTON	40.00				ľ				_	
PROGRAM DIR, LEARNING/RESEARCH/EVAL	4.0.00			_		Х		156,139.	0.	50,768.
(7) MARCOS POPOVICH	40.00							440.076		40.05=
PROGRAM DIRECTOR, GRANTMAKING	12.00	4				Х		149,376.	0.	49,365.
(8) PAUL MARSH	40.00					l		150 505		22 246
IT MANAGER	40.00		_			Х		158,585.	0.	33,216.
(9) PAMELA WHITE	40.00							117 006	0	26 255
CLERK	2 00			Х				117,296.	0.	26,255.
(10) GREGORY GUNN	3.00	3,7						20 000	_	0
DIRECTOR	2 00	Х	_					39,000.	0.	0.
(11) WARREN SIMMONS	2.00	37						27 667	_	0
DIRECTOR	2 00	Х						27,667.	0.	0.
(12) BETTY FRANSISCO	2.00	v						24 000	_	0
DIRECTOR	2.00	Х						24,000.	0.	0.
(13) ELIZABETH HILPMAN DIRECTOR	2.00	Х						24 000	0.	0.
(14) ELSA NUNEZ	3.00	Λ						24,000.	0.	<u> </u>
DIRECTOR	3.00	Х						24,000.	0.	0.
(15) CHRISTINA JIMENEZ MORET	1.00	Λ	$\vdash$					24,000.	0.	<u></u>
DIRECTOR	1.00	Х						24,000.	0.	0.
(16) COLLEEN QUINT	3.00		$\vdash$					21,000		<u>``</u>
DIRECTOR	1110	х						24,000.	0.	0.
(17) JOHN JACKSON	2.00	<u></u>								
DIRECTOR		х						20,000.	0.	0.
232007 12-13-22		_							, , , ,	Form <b>990</b> (2022)

232007 12-13-22

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Part VII   Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A)	(D)	(E)	(F)							
Name and title	Average hours per week	box	Position (do not check more than one box, unless person is both an officer and a director/trustee)		Reportable compensation from	Reportable compensation from related	Estimated amount of other			
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(18) DEBORAH JEWELL-SHERMAN	1.00									•
DIRECTOR		Х						20,000.	0.	0.
(19) JOHN REMONDI DIRECTOR	2.00	х						20,000.	0.	0.
(20) DANIA VAZQUEZ	2.00								7.	
DIRECTOR		Х						20,000.	0.	0.
(21) NICHOLAS WARREN	2.00									
DIRECTOR		Х						20,000.	0.	0.
(22) MISHONE DONELSON DIRECTOR	2.00	х						20,000.	0.	0.
(23) STEPHEN KOSSAKOSKI	2.00									
DIRECTOR (UNTIL 9/30/22)		Х						15,000.	0.	0.
(24) PRABAL CHAKRABARTI	2.00									
DIRECTOR	-	Х						0.	0.	0.
							7			
					X					
1b Subtotal								2,638,292.	0.	418,436.
c Total from continuation sheets to Part VII, Section A 0. 0.										0.
d Total (add lines 1b and 1c)			<u> </u>					2,638,292.	0.	418,436.

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

Yes No
3 X
4 X

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

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

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services

Section B. Independent Contractors

rendered to the organization? If "Yes," complete Schedule J for such person

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.

(A) Name and business address	(B) Description of services	(C) Compensation
UBUNTO RESEARCH & EVALUATION, 1345 N	EVALUATION	
JEFFERSON ST STE 515, MILWAUKEE, WI 53202	CONSULTANT	487,350.
PRIME BUCHHOLZ & ASSOCIATES	INVESTMENT	
273 CORPORATE DRIVE, PORTSMOUTH, NH 03801	CONSULTANT	220,839.
A/B PARTNERS	COMMUNICATIONS	
PO BOX 341, MAPLEWOOD, NJ 07040	CONSULTANT	171,061.
DIVERSIFIED SEARCH , 2005 MARKET STREET		
33RD FLOOR, PHILADELPHIA, PA 19103	SEARCH CONSULTANT	106,000.
2 Total number of independent contractors (including but not limited to those listed	d above) who received more than	

Form 990 (2022)

\$100,000 of compensation from the organization

		Check if Schedule O contains a response or note to any I	ne in this Part VIII			
			(A)	(B)	(C)	(D)
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
				iunction revenue	business revenue	sections 512 - 514
Siδ	1 a	Federated campaigns 1a				
Contributions, Gifts, Grants and Other Similar Amounts	b					
င်္ပ		Fundraising events 1c				
fts,		Related organizations 1d	1			
ig ig		Government grants (contributions) 1e				
Sin		All other contributions, gifts, grants, and	-			
e Ei	'	similar amounts not included above <b>1f</b> 700,000				
흕	~		-			
o d	g	\ <u></u>	700,000.			
OB		Total. Add lines 1a-1f  Business Code	,			
_	0 -		, <u> </u>			
ice	2 a					
er ne	b					
am Ser	С.					
gra Be	d					
Program Service Revenue	e					
-		All other program service revenue	1			
$\rightarrow$	g		+ +	_		
	3	Investment income (including dividends, interest, and	2 152 507		200 515	2052072
	_	other similar amounts)	3,153,587.		300,515.	2853072.
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
		(i) Real (ii) Personal				
	6 a					
	b					
	С	. ,				
		Net rental income or (loss)				
	7 a	Gross amount from sales of (i) Securities (ii) Other				
		assets other than inventory <b>7a</b> 288,419,161.	4			
	b	Less: cost or other basis				
an l		and sales expenses				
ther Revenue	С	Gain or (loss) 7c 19,394,984.				
æ	d	Net gain or (loss)	19,394,984.			19394984.
þer	8 a	Gross income from fundraising events (not				
ᅙ		including \$ of				
		contributions reported on line 1c). See				
		Part IV, line 18 8a	_			
	b	Less: direct expenses				
		Net income or (loss) from fundraising events				
	9 a	Gross income from gaming activities. See				
		Part IV, line 19				
		Less: direct expenses 9b				
	С	Net income or (loss) from gaming activities				
	10 a	Gross sales of inventory, less returns				
		and allowances 10a	_			
	b	Less: cost of goods sold10b				
	С	Net income or (loss) from sales of inventory				
s		Business Code				
e jo	11 a					
ane	b					
Miscellaneous Revenue	С					
Aisc B	d	All other revenue				
_	е	Total. Add lines 11a-11d				
	12	Total revenue. See instructions	23,248,571.	0.	300,515.	22248056.
						E 000 (0000)

### 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 (C) Management and general expenses (D) Do not include amounts reported on lines 6b. Program service expenses Total expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations 17,813,997. 17,813,997. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 ....... Benefits paid to or for members ..... Compensation of current officers, directors, 1,905,704. 454,910. 1,450,794 trustees, and key employees ..... Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 2,033,568. 1,483,670. 549,898. Other salaries and wages 7 Pension plan accruals and contributions (include 282,440. 97,384 185,056. section 401(k) and 403(b) employer contributions) 174,451. 260,570. 86,119. Other employee benefits 9 205,352. 117,029. 88,323. 10 Payroll taxes Fees for services (nonemployees): Management 56,905. 56,905. Legal 85,860. 85,860. Accounting 66,000. 66,000. Lobbying Professional fundraising services. See Part IV, line 17 1,127,740. 1,127,740. Investment management fees ..... Other. (If line 11g amount exceeds 10% of line 25, 1,500,143. 1,138,504. 361,639. column (A), amount, list line 11g expenses on Sch O.) Advertising and promotion 12 82,219. 48,301. 33,918. Office expenses 13 143,404. 74,418. 68,986. Information technology 14 15 Royalties 297,405. 174,160. 123,245 16 Occupancy 74,851. 58,302. 16,549. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Payments to affiliates \_\_\_\_\_ 21 230,126. 134,762. 95,364. 22 Depreciation, depletion, and amortization 53,867. 31,544. 22,323. 23 Other expenses. Itemize expenses not covered 24 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.) 98,235. 98,235. REGIONAL ASSOCIATIONS PROF. DVLPMT/MEMBERSHIP 9,378. 6,460. 2,918. С d All other expenses 26,327,764. 21,993,799. 4,333,965. 0. Total functional expenses. Add lines 1 through 24e 25 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)

Form 990 (2022)

Га	IL A	Daidlice Stieet					
		Check if Schedule O contains a response or note	e to an	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			227,497.	1	974,961.
	2	Savings and temporary cash investments		2			
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net		4			
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, substa	antial c	ontributor, or 35%			
		controlled entity or family member of any of thes	e perso	ons		5	
	6	Loans and other receivables from other disqualif	ied per	sons (as defined			
		under section 4958(f)(1)), and persons described	in sec	tion 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net			424,011.	7	1,017,499.
Assets	8	Inventories for sale or use				8	·
ğ	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	2,622,594.			
	b	Less: accumulated depreciation	10b	2,149,255.	641,985.	10c	
	11	Investments - publicly traded securities			194,142,360.	11	175,859,301.
	12	Investments - other securities. See Part IV, line 1			390,058,111.	12	304,869,814.
	13	Investments - program-related. See Part IV, line 1	I1			13	
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equa			585,493,964.	16	483,194,914.
	17	Accounts payable and accrued expenses			1,795,569.	17	2,301,895.
	18	Grants payable			15,427,264.	18	11,778,654.
	19	Deferred revenue			•	19	
	20	Tax-exempt bond liabilities		20			
	21	Escrow or custodial account liability. Complete F				21	
es	22	Loans and other payables to any current or form					
Liabilities		trustee, key employee, creator or founder, subst					
jab		controlled entity or family member of any of thes				22	
_	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines	17-24)	. Complete Part X			
		of Schedule D			17 222 022	25	14,080,549.
	26	Total liabilities. Add lines 17 through 25	_		17,222,833.	26	14,000,549.
တ္က		Organizations that follow FASB ASC 958, che	ck ner	e X			
nce		and complete lines 27, 28, 32, and 33.	/		568,271,131.	07	469,114,365.
<u>a</u>	27				300,2/1,131.	27	409,114,303.
g B	28	Net assets with donor restrictions				28	
ڃ		Organizations that do not follow FASB ASC 95	os, cne	eck nere			
P		and complete lines 29 through 33.				00	
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds				29	
SSE	30	Paid-in or capital surplus, or land, building, or eq				30	
χ¥	31	Retained earnings, endowment, accumulated inc			568,271,131.	31	160 111 365
ž	32	Total net assets or fund balances			585,493,964.	32	469,114,365.
	33	Total liabilities and net assets/fund balances			J0J,433,304.	33	483,194,914.

Pa	T XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>			
	Total revenue (must sevial Port VIII. solvens (A) line 19)		23	,24	8 <b>5</b>	71
1	Total revenue (must equal Part VIII, column (A), line 12)	<del></del>		,32		
2	Total expenses (must equal Part IX, column (A), line 25)	2				
3	Revenue less expenses. Subtract line 2 from line 1	3		,07		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		, 27		
5	Net unrealized gains (losses) on investments	5	-96	,07	1,5	/3.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					<b>-</b> -
_	column (B))	10	469	,11	4,3	65.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					Щ
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate					
	consolidated basis, or both:	·				
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		

#### **SCHEDULE A**

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

## **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** 

NELLIE MAE EDUCATION FOUNDATION, 04 - 2755323Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and 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). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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. 396 Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed in your governing document? (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions)) 00-0000000 7 17,813,997. SEE PART VI X 813 997 0. Total

#### Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
Section A. Public Support  Calendar year (or fiscal year beginning in)  1 Offists, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  2 Tax revenues levied for the organization without charge  2 Tax revenues levied for the organization or expended on its behalf or expended or expended on its behalf or expended on							
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	ender year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Tax revenues levide for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 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) Public support. Newtow line 4 Total Support  To						
4	dar year (or fiscal year beginning in) (a) 2018 (b) 2019 (c) 2020 (d) 2021 (e) 2022 (di)						
5	_					17	
	•				The state of the s		
	•						
	amount shown on line 11.						
	column (f)						
6	· · · · · · · · · · · · · · · · · · ·						
							<u> </u>
		(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
		(4) 2515	(10) 2010	(6) 2020	(4) 2021	(6) 2022	(i) rotar
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b		•				•	10% or
					-		
	organization meets the facts-and-circu						
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a		
						Schedule A	(Form 990) 2022

## 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.)

Sed	etion A. Public Support	ciow, picase comp	nete i art ii.j				
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	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		4				
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6	(=, == :=		(=)===	(-,	(-,	(4)
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	4					
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b	O					
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	J			•	( / ( / )	· —
	check this box and stop here						
	ction C. Computation of Publi					<del> </del>	
	Public support percentage for 2022 (I		•	column (f))		15	%
	Public support percentage from 2021		-			16	%
	ction D. Computation of Inves					<del> </del>	
	Investment income percentage for 20					17	%
	Investment income percentage from					18	%
19a	33 1/3% support tests - 2022. If the	organization did n	ot check the box of	on line 14, and line	15 is more than 3	3 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box ar	nd <b>stop here.</b> The	organization quali	fies as a publicly s	upported organiza	tion	
b	33 1/3% support tests - 2021. If the	· ·			•	•	
00	line 18 is not more than 33 1/3%, che						
<b>2</b> U	<b>Private foundation.</b> If the organization	in did not check a '	DOX OD IIDE 14 19:	a or ign checkith	us nox and see ins	Tructions	1 1

## Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

## Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **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)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- 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)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- 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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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? If "Yes," provide detail in Part VI.
- 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? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?

  If "Yes." complete Part I of Schedule L (Form 990).
- **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))? If "Yes," provide detail in **Part VI.**
- **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? If "Yes," provide detail in **Part VI.**
- 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? If "Yes," provide detail in Part VI.
- 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)? If "Yes," answer line 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

1 X 2 X 3a X 3b 3c 4a X 4b 4c 4c 5a X 5b 5c 5c 5c 7 X 8 X 9a X 9b X 9c X			Yes	No
2 X  3a X  3b				
2 X  3a X  3b	ı	4		v
3a X 3b 3c 4a X 4b 4c 5a X 5b 5c 6 X 7 X 8 X 9a X 9b X	ł	1		
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10b      le A (Form 990) 2022	.1		n 000'	2022

rai	Supporting Organizations (continued)			
		Υ	'es	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	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?	а		X
b	A family member of a person described on line 11a above?	b		X
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	С		X
Sect	tion B. Type I Supporting Organizations			
	A	Y	'es	No
	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	١,	.,	
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	- 4	X	
	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			Х
Sect	supervised, or controlled the supporting organization. 2 tion C. Type II Supporting Organizations			
000.	tion of Type in cupporting organizations		,T	No.
4	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	1	es	No
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)			
Sect	the supported organization(s). tion D. All Type III Supporting Organizations			
	77 11 0 0	Y	'es	No
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?			
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? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).			
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? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.			
Sect	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instruction Task Argurer lines 2s and 0h below.		,T	
	Activities Test. <b>Answer lines 2a and 2b below.</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	Y	'es	No
	the supported organization(s) to which the organization was responsive? If "Yes," 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  2			
	that these activities constituted substantially all of its activities.  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," 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.	,		
	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	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" provide details in Part VI.	1		
	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.    Section A - Adjusted Net Income	Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	Orga	nizations	
All other Type III non-functionally integrated supporting organizations must complete. Sections A through E.  Section A - Adjusted Net Income  (A) Prior Year (optional)  1 Net short-term capital gain 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 4 Add lines 1 through 3. 5 Depreciation and depletion 5 Depreciation and depletion 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of properly held for production of income (see instructions) 6 Portion of ogress income or for management, conservation, or maintenance of properly held for production of income (see instructions) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 Section B - Minimum Asset Amount (A) Prior Year (optional)  1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1 A Average monthly value of securities 1 A Average monthly value of securities 1 A Average monthly value of other non-exempt-use assets 1 to 1 Total (add lines 1a, 1b, and 1c) 9 Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 3 Subtract line 2 from line 1d. 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Net value of non-exempt-use assets (subtract line 6) 8 Minimum Asset Amount (add line 7 to line 6) 8 Minimum Asset Amount 1 Adjusted net income for prior year (from Section A, line 8, columin A) 1 Enter greater of line 1. 3 Minimum asset amount for prior year (from Section B, line 8, columin A) 3 Interval and the process of prior year (from Section B, line 8, columin A) 4 Enter greater of line 2 or line 3. 5 Income tax imposed in prior year	1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust or	Nov. 20, 1970 ( <i>explain in</i>	Part VI). See instructions.
Section A - Adjusted Net Income  (A) Prior Year  (potional)  1 Net short-term capital gain 2 Recoveries of prior-year distributions 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 4 Add inses 1 through 3. 5 Depreciation and depletion 5 Depreciation and depletion 5 Depreciation and depletion 5 Depreciation and depletion 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) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 Section B - Minimum Asset Amount (A) Prior Year (potional)  1 Aggregate fair market value of all non-exempt use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities b Average monthly value of securities 1 Average monthly value of securities 1 Total (add lines 1a, 1b, and 1c) 1 Total (add lines 1a, 1b, and 1c) 1 Total (add lines 1a, 1b, and 1c) 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 3 Subtract line 2 from line 1d. 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by 0.035. 7 Recoveries of prior-year distributions 7 Recoveries of prior-year distributions 7 Recoveries of prior-year distributions 7 Recoveries of prior-year (from Section A, line 8, column A) 7 Enter greater of line 2 inline 3. 8 Inlinemum asset amount for prior year (from Section B, line 8, column A) 8 Enter greater of line 2 or line 3. 9 Linemum asset amount for prior year from Section B, line 8, column A) 9 Enter greater of line 2 or line 3. 9 Linemum asset amount for prior year from Section B, line 8, column A) 1 A Enter greater of line 2 or line 3. 1 Linemum asset amount for prior year fr				·	<b>.</b>
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2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 Subtract line 2 from line 1d. 3 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). 4 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 6 Multiply line 5 by 0.035. 6 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) 8 8 Section C - Distributable Amount Current Year 1 Adjusted net income for prior year (from Section A, line 8, column A) 1 2 Enter 0.85 of line 1. 2 3 Minimum asset amount for prior year (from Section B, line 8, column A) 3 4 Enter greater of line 2 or line 3. 4 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to	е	Discount claimed for blockage or other factors			
2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 Subtract line 2 from line 1d. 3 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). 4 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 6 Multiply line 5 by 0.035. 6 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) 8 8 Section C - Distributable Amount Current Year 1 Adjusted net income for prior year (from Section A, line 8, column A) 1 2 Enter 0.85 of line 1. 2 3 Minimum asset amount for prior year (from Section B, line 8, column A) 3 4 Enter greater of line 2 or line 3. 4 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to		(explain in detail in Part VI):			
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).  5 Net value of non-exempt-use assets (subtract line 4 from line 3)  6 Multiply line 5 by 0.035.  7 Recoveries of prior-year distributions  8 Minimum Asset Amount (add line 7 to line 6)  Section C - Distributable Amount  Current Year  1 Adjusted net income for prior year (from Section A, line 8, column A)  2 Enter 0.85 of line 1.  2 Minimum asset amount for prior year (from Section B, line 8, column A)  3 Enter greater of line 2 or line 3.  4 Enter greater of line 2 or line 3.  5 Income tax imposed in prior year  6 Distributable Amount. Subtract line 5 from line 4, unless subject to	2		2		
see instructions).  5 Net value of non-exempt-use assets (subtract line 4 from line 3)  6 Multiply line 5 by 0.035.  7 Recoveries of prior-year distributions  7 Minimum Asset Amount (add line 7 to line 6)  8 Section C - Distributable Amount  1 Adjusted net income for prior year (from Section A, line 8, column A)  2 Enter 0.85 of line 1.  2 Inter greater of line 2 or line 3.  4 Enter greater of line 2 or line 3.  5 Income tax imposed in prior year  6 Distributable Amount. Subtract line 5 from line 4, unless subject to	3	Subtract line 2 from line 1d.	3		
see instructions).  5 Net value of non-exempt-use assets (subtract line 4 from line 3)  6 Multiply line 5 by 0.035.  7 Recoveries of prior-year distributions  7 Minimum Asset Amount (add line 7 to line 6)  8 Section C - Distributable Amount  1 Adjusted net income for prior year (from Section A, line 8, column A)  2 Enter 0.85 of line 1.  2 Inter greater of line 2 or line 3.  4 Enter greater of line 2 or line 3.  5 Income tax imposed in prior year  6 Distributable Amount. Subtract line 5 from line 4, unless subject to	4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
6 Multiply line 5 by 0.035. 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount 1 Adjusted net income for prior year (from Section A, line 8, column A) 1 2 Enter 0.85 of line 1. 2 Minimum asset amount for prior year (from Section B, line 8, column A) 3 Minimum asset amount for prior year (from Section B, line 8, column A) 4 Enter greater of line 2 or line 3. 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to			4		
6 Multiply line 5 by 0.035. 6 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount 1 Adjusted net income for prior year (from Section A, line 8, column A) 1 Enter 0.85 of line 1. 2 Income tax imposed in prior year 1 Income tax imposed in prior year 2 Income tax imposed in prior year 3 Distributable Amount. Subtract line 5 from line 4, unless subject to	5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount Current Year 1 Adjusted net income for prior year (from Section A, line 8, column A) 1 2 Enter 0.85 of line 1. 2 3 Minimum asset amount for prior year (from Section B, line 8, column A) 3 4 Enter greater of line 2 or line 3. 4 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to	6		6		
Section C - Distributable Amount  Current Year  Adjusted net income for prior year (from Section A, line 8, column A)  Enter 0.85 of line 1.  Minimum asset amount for prior year (from Section B, line 8, column A)  Enter greater of line 2 or line 3.  Income tax imposed in prior year  Distributable Amount. Subtract line 5 from line 4, unless subject to	7		7		
1 Adjusted net income for prior year (from Section A, line 8, column A) 2 Enter 0.85 of line 1. 2 Minimum asset amount for prior year (from Section B, line 8, column A) 3 Enter greater of line 2 or line 3. 4 Enter greater of line 2 or line 3. 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to	8	Minimum Asset Amount (add line 7 to line 6)	8		
2 Enter 0.85 of line 1. 2 Minimum asset amount for prior year (from Section B, line 8, column A) 3 Enter greater of line 2 or line 3. 4 Income tax imposed in prior year 5 Distributable Amount. Subtract line 5 from line 4, unless subject to	Sect	ion C - Distributable Amount			Current Year
2 Enter 0.85 of line 1. 2 Minimum asset amount for prior year (from Section B, line 8, column A) 3 Enter greater of line 2 or line 3. 4 Encome tax imposed in prior year 5 Distributable Amount. Subtract line 5 from line 4, unless subject to	1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
4 Enter greater of line 2 or line 3. 5 Income tax imposed in prior year 5 Distributable Amount. Subtract line 5 from line 4, unless subject to	2		2		
4 Enter greater of line 2 or line 3. 4 5 Income tax imposed in prior year 5 6 Distributable Amount. Subtract line 5 from line 4, unless subject to	3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
5 Income tax imposed in prior year 5 6 Distributable Amount. Subtract line 5 from line 4, unless subject to	4		4		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to	5		5		
	6				
emergency temporary reduction (see instructions).		emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see	7		integra	ted Type III supporting orga	anization (see

Schedule A (Form 990) 2022

instructions).

Applied to 2022 distributable amount		
Remainder. Subtract lines 4a and 4b from line 4.		
Remaining underdistributions for years prior to 2022, if		
any. Subtract lines 3g and 4a from line 2. For result greater		
than zero, explain in Part VI. See instructions.		
Remaining underdistributions for 2022. Subtract lines 3h		
and 4b from line 1. For result greater than zero, explain in		
Part VI. See instructions.		
Excess distributions carryover to 2023. Add lines 3j		
and 4c.		
Breakdown of line 7:		
Excess from 2018		
Excess from 2019		
Excess from 2020		
Excess from 2021		
Excess from 2022		

Schedule A (Form 990) 2022

d

h Applied to 2022 distributable amount

4 Distributions for 2022 from Section D,

a Applied to underdistributions of prior years

line 7:

<u></u>с 5

i Carryover from 2017 not applied (see instructions)j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.

Part VI

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 1e; 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.)

### PART IV, SECTION A, LINE 1:

NELLIE MAE EDUCATION FOUNDATION, INC. (THE "FOUNDATION") IS ORGANIZED AND OPERATED AS AN ORGANIZATION EXEMPT FROM TAXATION UNDER IRC SECTION 501(C)(3). IT IS NOT A PRIVATE FOUNDATION BECAUSE IT IS A SUPPORTING ORGANIZATION AS DESCRIBED IN IRC SECTION 509(A)(3). IN PRIOR YEARS, THE FOUNDATION WAS ALSO A PUBLICLY SUPPORTED AS DESCRIBED IN IRC SECTION 509(A)(2).

PURSUANT TO ITS ARTICLES OF ORGANIZATION, THE FOUNDATION OPERATES EXCLUSIVELY FOR THE BENEFIT OF, AND TO PROMOTE THE CHARITABLE AND EDUCATIONAL PURPOSES OF A CLASS OF ORGANIZATIONS, INCLUDING UNIVERSITIES, COLLEGES, SECONDARY SCHOOLS, ELEMENTARY SCHOOLS, AND OTHER EDUCATIONAL ORGANIZATIONS WHICH ARE DESCRIBED IN IRC SECTION 501(C)(3) AND WHICH ARE NOT PRIVATE FOUNDATIONS AS DESCRIBED IN IRC THE FOUNDATION'S ACTIVITIES INCLUDE MAKING GRANTS TO SECTION 509(A). THE PUBLIC CHARITIES IT SUPPORTS AND PROVIDING SERVICES TO THOSE A MAJORITY OF THE FOUNDATION'S DIRECTORS ARE ORGANIZATIONS. REPRESENTATIVES OF ORGANIZATIONS THAT WOULD BE ELIGIBLE TO RECEIVE SUPPORT FROM THE FOUNDATION. IN ADDITION, THE COMMITTEE THAT NOMINATES BOARD MEMBERS IS COMPOSED ENTIRELY OF DIRECTORS WHO ARE ALSO OFFICERS, DIRECTORS, KEY EMPLOYEES OR PERSONS SERVING IN A LEADERSHIP ROLE IN PUBLIC CHARITIES THAT WOULD BE ELIGIBLE TO RECEIVE SUPPORT FROM THE FOUNDATION. THE FOUNDATION ONLY SUPPORTS PUBLIC CHARITIES DESCRIBED IN IRC SECTION 509(A)(1) OR 509(A)(2) AND ONLY ORGANIZATIONS THAT ARE ORGANIZED IN THE UNITED STATES.

### Schedule B

Internal Revenue Service

(Form 990)

Department of the Treasury

### Schedule of Contributors

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

Name of the organization

**Employer identification number** 

NELLIE MAE EDUCATION FOUNDATION INC. 04-2755323

Organization type (check one):

Filers of: Section:

Form 990 or 990-EZ

X 501(c)( 3 ) (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

X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

#### **Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$

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

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022)

Name of organization

Employer identification number

## NELLIE MAE EDUCATION FOUNDATION, INC.

04-2755323

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 200,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 500,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for
			noncash contributions.)

Name of organization Employer identification number

## NELLIE MAE EDUCATION FOUNDATION, INC.

04-2755323

Part II	Name of Preparts (		2733323
Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
3453 11-15	20	*	Schedule B (Form 990) (2022

Name of organization **Employer identification number** NELLIE MAE EDUCATION FOUNDATION, INC. 04-2755323 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (d) Description of how gift is held (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

## SCHEDULE C (Form 990)

Department of the Treasury

## **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

Internal Revenue Service

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

•	Section 501(c)(4), (5), or (6) organizat	tions: Complete Part III.			
Nan	ne of organization			Empl	oyer identification number
	NELLIE	MAE EDUCATION FOU	NDATION, IN	c.	04-2755323
Pa	rt I-A Complete if the org	janization is exempt unde	r section 501(c) o	or is a section 527 or	ganization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	tures		\$	
Pa	rt I-B Complete if the org	janization is exempt unde	r section 501(c)(3	3).	
	Enter the amount of any excise tax	· · · · · · · · · · · · · · · · · · ·	-		
2	Enter the amount of any excise tax	incurred by organization manager	rs under section 4955	\$	
3	If the organization incurred a section	on 4955 tax, did it file Form 4720 f	or this year?		Yes No
	Was a correction made?				
b	If "Yes," describe in Part IV.				
Pa	rt I-C Complete if the org	ganization is exempt unde	r section 501(c), o	except section 501(c	<u>)(3).</u>
	Enter the amount directly expended			***************************************	
2	Enter the amount of the filing organ				
	exempt function activities			\$	
3	Total exempt function expenditures				
	line 17b				
	Did the filing organization file Form				
5	Enter the names, addresses and en made payments. For each organiza		•	-	
	contributions received that were pre-		• •		•
	political action committee (PAC). If				99
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990) 2022

LHA

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Schedule	e C (Form 990) 2022	NELLIE M	IAE E	DUCATION FO	OUNDATION,	INC. 04-2	2755323 Page <b>2</b>
Part II	I-A Complete if the org	anization is	exem	pt under section	501(c)(3) and file	ed Form 5768 (ele	ection under
A Chec	expenses, and shar	e of excess lob	bying ex			group member's nam	ne, address, EIN,
<b>D</b> Chec	Limi	ts on Lobbying	Expen	•	visions арріу.	(a) Filing organization's totals	<b>(b)</b> Affiliated group totals
<b>1a</b> To	tal lobbying expenditures to influ	uence public on	inion (ar	assroots lobbying)			
	tal lobbying expenditures to influ						
	tal lobbying expenditures (add li						
	her exempt purpose expenditure						
e To	tal exempt purpose expenditure	s (add lines 1c	and 1d)				
f Lo	bbying nontaxable amount. Ente	er the amount fr	om the	following table in both	columns.		,
lf t	he amount on line 1e, column (a) o	r (b) is: T	he lobb	ying nontaxable am	ount is:		
No	ot over \$500,000	2	0% of th	ne amount on line 1e.			
Ov	ver \$500,000 but not over \$1,000	0,000 \$	100,000	plus 15% of the exce	ess over \$500,000.		
	er \$1,000,000 but not over \$1,5		175,000	plus 10% of the exce	ess over \$1,000,000.		
Ov	ver \$1,500,000 but not over \$17,	000,000 \$	225,000	plus 5% of the exces	ss over \$1,500,000.		
Ov	/er \$17,000,000		1,000,0	00.			
<b>a</b> Gr	assroots nontaxable amount (en	ter 25% of line	1 f\				
•	ubtract line 1g from line 1a. If zero		,				
	ubtract line 1f from line 1c. If zero	•					
	there is an amount other than ze						
	porting section 4911 tax for this						Yes No
	(Some organizations th	4-Ye nat made a sec	ear Aver	aging Period Under	Section 501(h) nave to complete all		elow.
		Lobbying	Expend	ditures During 4-Yea	r Averaging Period	1	
(o	Calendar year or fiscal year beginning in)	<b>(a)</b> 2019	4	<b>(b)</b> 2020	<b>(c)</b> 2021	(d) 2022	(e) Total
<b>2a</b> Lo	bbying nontaxable amount		_				
	bbying ceiling amount 50% of line 2a, column(e))						
<b>c</b> To	ntal lobbying expenditures						
	assroots nontaxable amount						
	assroots ceiling amount 50% of line 2d, column (e))						

Schedule C (Form 990) 2022

## Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(;	a)	(b	)
of the lobbying activity.	Yes	No	Amo	unt
During the year, did the filing organization attempt to influence foreign, national, state, or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of:				
a Volunteers?		X		
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X		
c Media advertisements?		X		
d Mailings to members, legislators, or the public?		X		
e Publications, or published or broadcast statements?		X		
f Grants to other organizations for lobbying purposes?		X		000
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		66	,000
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X		
i Other activities?		Х		000
j Total. Add lines 1c through 1i			66	,000
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X		
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c	on 501/o\/	5) or ooc	tion	
501(c)(6).	011 00 1 (0)(	o, or sec	LIOII	
			Yes	No
Were substantially all (90% or more) dues received nondeductible by members?		1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from t				
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501 (c) (d), section 501 (c) (d	on 501(c)(	5), or sec	tion	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				3, is
answered "Yes."				
1 Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)				
expenses for which the section 527(f) tax was paid).				
a Current year		2a		
<b>b</b> Carryover from last year		2b		
c Total				
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political			
expenditures next year?		4		
5 Taxable amount of lobbying and political expenditures. See instructions		5		
Part IV Supplemental Information				
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated grou	p list); Part II-	A, lines 1 a	nd 2 (See	
instructions); and Part II-B, line 1. Also, complete this part for any additional information.				
PART II-B, LINE 1, LOBBYING ACTIVITIES:				
A LOBBYING FIRM WAS HIRED DURING 2022 TO MONITOR ACTI	VITY O	1 PROP	OSED	
OMAND I DOTOLANTON ADDROGRAM NOO DOMANA TOUR DESCRIPTION	a 2275 -		n	
STATE LEGISLATION AFFECTING THE FOUNDATION'S PRACTICE	S AND '	O MEE	r. MT.T.H	
CONTINUES AND CONTINUES CHARE VENERAL DECLES CHAR	TECTO	`		
COMMITTEE AND COMMITTEE STAFF MEMBERS TO DISCUSS SUCH	LEGISI	TATTON	•	

## **SCHEDULE D** (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements
Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Inspection

Name of the organization

NELLIE MAE EDUCATION FOUNDATION, INC.

**Employer identification number** 04 - 2755323

Par	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		or Accounts. Complete if the		
	organization answered Tes on Form 550, Farriv, inte	(a) Donor advised funds	(b) Funds and other accounts		
1	Total number at end of year	(2)	(4) - 2002 2002 2002		
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in v	vriting that the assets held in donor advis	ed funds		
	are the organization's property, subject to the organization's e	_			
6	Did the organization inform all grantees, donors, and donor ad				
	for charitable purposes and not for the benefit of the donor or				
Par	t II Conservation Easements. Complete if the org	anization answered "Yes" on Form 990,	Part IV, line 7.		
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).			
	Preservation of land for public use (for example, recreat	tion or education) Preservation of	f a historically important land area		
	Protection of natural habitat	Preservation of	f a certified historic structure		
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution in the form			
	day of the tax year.		Held at the End of the Tax Year		
а	Total number of conservation easements		2a		
b	Total acreage restricted by conservation easements		2b		
С	Number of conservation easements on a certified historic stru		2c		
d	Number of conservation easements included in (c) acquired a	fter July 25,2006, and not on a			
			2d		
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	organization during the tax		
	year				
4	Number of states where property subject to conservation eas				
5	Does the organization have a written policy regarding the peri				
_	violations, and enforcement of the conservation easements it		YesNo		
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and enforcing cons	servation easements during the year		
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conserva	tion easements during the year		
•	7 mount of expenses meaned in monitoring, mepecting, name	ing of violations, and officially concerva	tion oddomente daring the year		
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(	(h)(4)(B)(i)		
	and section 170(h)(4)(B)(ii)?				
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense	statement and		
	balance sheet, and include, if applicable, the text of the footne				
	organization's accounting for conservation easements.				
Par	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Ot	her Similar Assets.		
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.			
1a	If the organization elected, as permitted under FASB ASC 958	B, not to report in its revenue statement a	and balance sheet works		
	of art, historical treasures, or other similar assets held for pub	lic exhibition, education, or research in fu	urtherance of public		
	service, provide in Part XIII the text of the footnote to its finan	cial statements that describes these item	ns.		
b	If the organization elected, as permitted under FASB ASC 958	-			
	art, historical treasures, or other similar assets held for public $% \left( 1\right) =\left( 1\right) \left( 1\right) $	exhibition, education, or research in furth	nerance of public service,		
	provide the following amounts relating to these items:				
	(i) Revenue included on Form 990, Part VIII, line 1		\$		
			·		
2	If the organization received or held works of art, historical treatments				
	the following amounts required to be reported under FASB AS				
а	Revenue included on Form 990, Part VIII, line 1				
b	Assets included in Form 990, Part X		\$		

232051 09-01-22

Schedule D (Form 990) 2022

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2022

473,339.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X, column (B), line 10c.)

Concadio D	(1 01111 000) 2022	
Part VII	Investments -	Other Securitie

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.							
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value					
(1) Financial derivatives							
(2) Closely held equity interests							
(3) Other							
(A) DOMESTIC EQUITY	69,681,087.	END-OF-YEAR MARKET VALUE					
(B) FOREIGN EQUITY	42,805,017.	END-OF-YEAR MARKET VALUE					
(C) INVESTMENT FUND -							
(D) DISTRESSED CREDIT	34,301,785.	END-OF-YEAR MARKET VALUE					
(E) INVESTMENT FUND - FIXED							
(F) INCOME	10,757,076.	END-OF-YEAR MARKET VALUE					
(G) INVESTMENT FUND -							
(H) LONG/SHORT EQUITY	20,531,281.	END-OF-YEAR MARKET VALUE					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	304,869,814.						
Part VIII Investments - Program Related.							

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
otal (Col (h) must equal Form 000 Part V col (R) line 13 )		

## Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

	(a) Description	(b) Book value
(1)		
(2)		
(3)		
(4)		
(5)	· · · · · · · · · · · · · · · · · · ·	
(6)		
(7)		
(8)		
(9)		

## Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total	(0.1 (1) 15 (0.00 D 1) (1/0 (1) (1) (0.00 )	

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

Schedule D (Form 990) 2022

<sup>2.</sup> Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... X

## 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

#### PART X, LINE 2:

THE FOUNDATION ACCOUNTS FOR THE EFFECT OF ANY UNCERTAIN TAX POSITIONS

BASED ON A "MORE LIKELY THAN NOT" THRESHOLD TO THE RECOGNITION OF THE TAX

POSITIONS BEING SUSTAINED BASED ON THE TECHNICAL MERITS OF THE POSITION

UNDER SCRUTINY BY THE APPLICABLE TAXING AUTHORITY. IF A TAX POSITION OR

POSITIONS ARE DEEMED TO RESULT IN UNCERTAINTIES OF THOSE POSITIONS, THE

UNRECOGNIZED TAX BENEFIT IS ESTIMATED BASED ON A "CUMULATIVE PROBABILITY

ASSESSMENT" THAT AGGREGATES THE ESTIMATED TAX LIABILITY FOR ALL UNCERTAIN

TAX POSITIONS. INTEREST AND PENALTIES ASSESSED, IF ANY, ARE ACCRUED AS

INCOME TAX EXPENSE.

THE FOUNDATION HAS IDENTIFIED ITS TAX STATUS AS A TAX EXEMPT ENTITY AND

26,327,764.

Schedule D (Form 990) NELLIE MAE EDUCATION FOUNDATION, INC. 04-2755323 Page **5** Part XIII Supplemental Information (continued) Part VII Investments - Other Securities. See Form 990, Part X, line 12. (a) Description of security or category (c) Method of valuation: (b) Book value (including name of security) Cost or end-of-year market value INVESTMENT FUND - MULTI-STRATEGY 44,647,489. **FMV** REAL ESTATE FUND 13,472,059. FMV DIRECT REAL ASSET - TIMBER 49,292. **FMV** PRIVATE COMMODITY 6,241,590 **FMV** NATURAL RESOURCES FUND OF FUNDS 748,588. **FMV** PRIVATE EQUITY 42,141,670. FMV GLOBAL EQUITY 19,492,880. FMV

Schedule D (Form 990)

### SCHEDULE F (Form 990)

Department of the Treasury

## Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990.

Open to Public

OMB No. 1545-0047

Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service

Inspection

Name of the organization **Employer identification number** NELLIE MAE EDUCATION FOUNDATION, 04-2755323 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (b) Number of (c) Number of (d) Activities conducted in the region (e) If activity listed in (d) (f) Total (a) Region employees, agents, and expenditures offices (by type) (such as, fundraising, prois a program service, for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region CENTRAL AMERICA AND THE CARIBBEAN 0 INVESTMENTS 48,005,343. 0 0 48,005,343. 3 a Subtotal **b** Total from continuation 0 sheets to Part I ...... Totals (add lines 3a 48,005,343.

232071 10-17-22

and 3b)

Schedule F (Form 990) 2022

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States.	Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any
recipient who received more than \$5,000. Part II can be duplicated if additional space is n	needed.

1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)		(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
					1			
						<b></b>		
					8			
				C				
2 Enter total number of	recipient organization	ns listed above that are r	recognized as charities by the t	foreign country,	recognized as a tax	ı	ı	1
exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter								

3 Enter total number of other organizations or entities .

Part III Grants and Other Assistance Part III can be duplicated if a			tes. Complete i	if the organization answered "Yes" o	on Form 990, Part	IV, line 16.	
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
				2			
			)				

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X Yes	☐ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	X Yes	☐ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	X Yes	☐ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes,"  the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain  Foreign Partnerships (see Instructions for Form 8865)	X Yes	☐ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

## SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

## **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

2022

OMB No. 1545-0047

Open to Public Inspection

Name of the organization	F FDIICATT	ON FOUNDATION	ON THE				Employer identification number $04-2755323$
Part I General Information on Grants a		ON FOUNDATIO	JN, INC.				04-2733323
Does the organization maintain records to criteria used to award the grants or assis     Describe in Part IV the organization's pro-	o substantiate the tance?						
Part II Grants and Other Assistance to I recipient that received more than \$	•				anization answered "Y	'es" on Form 990, Part	IV, line 21, for any
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
MANCHESTER PUBLIC SCHOOLS 45 N SCHOOL STREET MANCHESTER, CT 06042	06-6001633	PUBLIC SCHOOL	900,000.	0.			ADVANCING COMMUNITY-SCHOOL PARTNERSHIPS
PIONEER VALLEY PROJECT, INC. 45 MAPLE STREET SPRINGFIELD, MA 01105	04-3343623	501(C)(3)	900,000.	0.			ADVANCING COMMUNITY-SCHOOL PARTNERSHIPS
WORCESTER EDUCATION COLLABORATIVE (UNITED WAY OF CENTRAL MASSACHUSETTS) - 484 MAIN STREET, SUITE 300 - WORCESTER, MA 01608	04-2104017	501(c)(3)	900,000.	0.			ADVANCING COMMUNITY-SCHOOL PARTNERSHIPS
ROGER WILLIAMS UNIVERSITY  1 EMPIRE STREET CYCLE - SUITE 513 PROVIDENCE, RI 02903	05-0277222	501(C)(3)	545,000.	0.			SUPPORT YOUTH LEADERSHIP INSTITUTE AND NEYON MEMBERSHIP ORGANZATIONS
BELOVED COMMUNITY 3157 GENTILLY BLVD. #176 NEW ORLEANS, LA 70122	81-3388287	501(C)(3)	375,719.	0.			TECHNICAL ASSISTANCE PROVIDER FOR ORGANIZATIONS LED BY PEOPLE OF COLOR
ROGER WILLIAMS UNIVERSITY  1 EMPIRE STREET CYCLE - SUITE 513 PROVIDENCE, RI 02903  2 Enter total number of section 501(c)(3) ar	05-0277222		367,000.	0.			SUPPORT AMPLIFYING YOUTH VOICE & LEADERSHIP TECHNICAL ASSISTANCE AND INFLATION SUPPORT 257.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

3 Enter total number of other organizations listed in the line 1 table

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTER FOR LEADERSHIP AND EDUCATIONAL EQUITY - PO BOX 9259 - PROVIDENCE, RI 02940	27-1863010	501(C)(3)	349,812.	0.			CLEE FACILITATION OF ACS
PARENT VILLAGES 393 BELMONT AVENUE, UNIT 81241 SPRINGFIELD, MA 01138	83-3840814	501(C)(3)	312,000.	0.	9		SUPPORTING ORGANIZATIONS LED BY PEOPLE OF COLOR
SAVE GIRLS ON FYER, INC. 276 HIGHLAND AVE WATERBURY, CT 06708	46-2376450	501(C)(3)	312,000.	0.			SUPPORTING ORGANIZATIONS LED BY PEOPLE OF COLOR
BOSTON CHINATOWN NEIGHBORHOOD CENTER, INC 38 ASH STREET - BOSTON, MA 02111	23-7209691	501(C)(3)	300,000.	0.			SUPPORTING ORGANIZATIONS LED BY PEOPLE OF COLOR
CAMBODIAN MUTUAL ASSISTANCE ASSOCIATION - 465 SCHOOL STREET - LOWELL, MA 01851	22-2553560	501(C)(3)	300,000.	0.			SUPPORTING ORGANIZATIONS LED BY PEOPLE OF COLOR
CHARLES HOUSTON CULTURAL PROJECT, INC/BLACK EXCELLENCE ACADEMY - 115 BEECHING STREET - WORCESTER, MA 01602	04-3338778	501(C)(3)	300,000.	0.			SUPPORTING ORGANIZATIONS LED BY PEOPLE OF COLOR
COLLABORATIVE PARENT LEADERSHIP ACTION NETWORK (HEALTH RESOURCES IN ACTION, INC C/O HEALTH RESOURCES IN ACTION 2 BOYLSTON ST.	04-2229839	C	300,000.	0.			SUPPORTING ORGANIZATIONS LED BY PEOPLE OF COLOR
FRIENDS AND MENTORS INC. 39 ORCHARD AVENUE BROCKTON, MA 02301	82-2395095	501(C)(3)	300,000.	0.			SUPPORTING ORGANIZATIONS LED BY PEOPLE OF COLOR
QUINCY ASIAN RESOURCES, INC. 1509 HANCOCK STREET, SUITE 209 QUINCY, MA 02169	01-0556446	501(C)(3)	300,000.	0.			SUPPORTING ORGANIZATIONS LED BY PEOPLE OF COLOR

		ON FOUNDATIO		- 10.1	(5		4-2755323 Page
Part II Continuation of Grants and Other A	Assistance to Doi	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa I	rt II.) T	T
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VIETNAMESE AMERICAN INITIATIVE FOR							
DEVELOPMENT, INC 42 CHARLES					_		
STREET SUITE E - DORCHESTER, MA							SUPPORTING ORGANIZATIONS
02122	04-3289039	501(C)(3)	300,000.	0.			LED BY PEOPLE OF COLOR
WATERBURY BRIDGE TO SUCCESS							
COMMUNITY PARTNERSHIP - 100 N. ELM							
STREET, 2ND FLOOR - WATERBURY, CT							SUPPORTING ORGANIZATIONS
06702	06-0646634	501(C)(3)	300,000.	0.			LED BY PEOPLE OF COLOR
			,				
ABOLITIONIST TEACHING NETWORK							
4203 HOMER AVE							
CINCINNATI, OH 45227	85-2052580	501(C)(3)	250,000.	0.			SERVING EDUCATORS
DANBURY PUBLIC SCHOOLS (UNITED WAY			,				
OF WESTERN CONNECTICUT) - 63							ADVANCING
BEAVER BROOK ROAD - DANBURY, CT							COMMUNITY-SCHOOL
06810-6211		PUBLIC SCHOOL	250,000.	0.			PARTNERSHIPS
HISPANIC COALITION OF GREATER							
WATERBURY - 135 EAST LIBERTY ST							DIVERSIFYING THE EDUCATOR
WATERBURY, CT 06706	06-1349937	501(C)(3)	250,000.	0.			PIPELINE
				-			
NATIONAL EQUITY PROJECT							
(FORMERLY BAYCES) 1720 BROADWAY, SU							SUPPORTS LEADERS TO
OAKLAND, CA 94612	94-3222960	501(C)(3)	250,000.	0.			TRANSFORM THEIR SYSTEMS
ommins, on store	31 3222300	301(0)(3)	250,000.	••			
TEACHING LAB							
PO BOX 73008							SUPPORTING EDUCATOR
WASHINGTON, DC 20056	81-3546317	501/C)/3)	250,000.	0.			SERVING ORGANIZATIONS
	01-3340317	501(0)(3)	230,000.	0.			SERVING ORGANIZATIONS
PALANTE RESTORATIVE JUSTICE							
PROGRAM (LIGHTHOUSE HOLYOKE) - THE PALANTE RESTORATIVE JUSTICE							CHERODE VOLUME OPCANTATES
	04 6001303	E01/G\/2\	216 722	^			SUPPORT YOUTH ORGANIZING
PROGRAM, HOLYOKE HIGH SCHOOL, 500	04-6001393	DUI(C)(3)	216,733.	0.			WORK
DOGREERI ED DUTI ANMUDODY ADVITORS							DADMNEDGUID HAD MITE
ROCKEFELLER PHILANTHROPY ADVISORS,							PARTNERSHIP FOR THE
INC 6 WEST 48TH STREET, 10TH	12 2645522	F01/G)/3	160 000	_			FUTURE OF LEARNING AND
FLOOR - NEW YORK, NY 10036	13-3615533	DOT(C)(3)	162,000.	0.			INFLATION SUPPORT

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant
organization or government	(S) LIN	if applicable	cash grant	noncash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
EMPOWER YOURSELF, LTD							
EMPOWER YOURSELF LTD 47 ROCK MEADOW							SUPPORTING ORGANIZATIONS
BROCKTON, MA 02301	27-4762141	501(C)(3)	150,000.	0.			LED BY PEOPLE OF COLOR
PT PARTNERS (UNITED WAY COASTAL			, -				
FAIRFIELD COUNTY, INC.) - 855 MAIN							
STREET, 10TH FLOOR - BRIDGEPORT,							SUPPORTING ORGANIZATIONS
CT 06604	06-0864341	501(C)(3)	150,000.	0.			LED BY PEOPLE OF COLOR
RIVERA MEMORIAL FOUNDATION, INC.							
186 CHERRY STREET							SUPPORTING ORGANIZATIONS
WATERBURY, CT 06702	06-1536766	501(C)(3)	150,000.	0.			LED BY PEOPLE OF COLOR
,			,				ADVANCING EQUITABLE
SOUTH SHORE STARS, INC.							EDUCATION FOR BIPOC
200 MIDDLE STREET							STUDENTS BY REDUCING
EAST WEYMOUTH, MA 02189	23-7097840	501(C)(3)	144,999.	0.			SYSTEMIC BARRIERS TO
RHODE ISLAND KIDS COUNT							
ONE UNION STATION				,			
PROVIDENCE, RI 02903	06-1485449	501(C)(3)	125,000.	0.			ADVOCACY COHORT
BEND THE ARC							
330 SEVENTH AVENUE							SUPPORTING AND GROWING
NEW YORK, NY 10001	52-1332694	501(C)(3)	112,000.	0.			YOUTH VOICE
CITY WIDE YOUTH COALITION, INC.							
928 CHAPEL STREET SUITE 201/202							SUPPORTING AND GROWING
NEW HAVEN, CT 06510	06-1386638	501(C)(3)	112,000.	0.			YOUTH VOICE
CONNECTICUT VOICES FOR CHILDREN							
33 WHITNEY AVENUE							ADVOCACY COHORT YEAR 2
NEW HAVEN, CT 06510	06-1435280	501(C)(3)	112,000.	0.			AND INFLATION SUPPORT
OH DIAGE AND DROUBL CHUIDRING THEFE							
CT BLACK AND BROWN STUDENT UNION							GOAL THIONG WEAR A AND
(A BETTER WAY FOUNDATION) - PO BOX	06 1576303	E01/G\/3\	110 000	•			COALITIONS YEAR 2 AND
942 - HARTFORD, CT 06143	06-1576383	DOT(C)(2)	112,000.	0.			INFLATION SUPPORT

Part II Continuation of Grants and Other	Assistance to Do⊦ ⊺	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa T	rt II.) T	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEARING YOUTH VOICES (A BETTER WAY							HEARING YOUTH VOICES:
FOUNDATION) - P. O. BOX 615 - NEW							AYVL GRANT YEAR 3 AND
LONDON, CT 06320	06-1576383	501(C)(3)	112,000.	0.			INFLATION SUPPORT
MASSACHUSETTS BUDGET & POLICY							
							ADVOCACY COHORT - YEAR 2
CENTER - ONE STATE STREET, SUITE 1250 - BOSTON, MA 02109	04-2967537	E01/G)/2)	112,000.	0.			ADVOCACY COHORY - YEAR 2
MASSACHUSETTS EDUCATION JUSTICE	04-2907557	501(C)(3)	112,000.	0.			AND INFLATION SUPPORT
ALLIANCE - EDUCATION FUND (RESIST							
INC.) - 375 CENTRE STREET -							COALITIONS YEAR 2 AND
BOSTON, MA 02130	04-2433182	501(C)(3)	112,000.	0			INFLATION SUPPORT
2021011, 1811 02200	01 2100202	001(0)(0)					
NATIONAL PUBLIC EDUCATION SUPPORT							
FUND - 1425 K STREET, NW SUITE 700							OPERATING GRANT AND
- WASHINGTON, DC 20005	26-3015634	501(C)(3)	112,000.	0.			INFLATION SUPPORT
NH CENTER FOR JUSTICE AND EQUITY							
(FOUNDATION FOR HEALTHY							
COMMUNITIES) - 125 AIRPORT ROAD -							OPERATING AND INFLATION
CONCORD, NH 03301	02-0275078	501(C)(3)	112,000.	0.			SUPPORT
PORTLAND OUTRIGHT (SOUTHERN MAINE							
WORKS' CENTER) - 56 NORTH STREET,							SUPPORTING AND GROWING
SUITE 100 - PORTLAND, ME 04101	20-4982064	501(C)(3)	112,000.	0.			YOUTH VOICE
DEAGUING HIGHED NH							
REACHING HIGHER NH							ADVOCACY COLLODS VEAD
40 N. MAIN STREET, SUITE 204	47 4207022	E01/G)/3)	112 000	0			ADVOCACY COHORT - YEAR 2
CONCORD, NH 03301	47-4397833	501(0)(3)	112,000.	0.			AND INFLATION SUPPORT SUPPORTING THE FIELD OF
RESIST INC.							YOUTH ORGANIZING IN NEW
P.O. BOX 301240							HAMPSHIRE: YEAR 2 AND
	04-2433182	501/01/31	112 000	0.			
BOSTON, MA 02130	04-2433162	D01(C)(3)	112,000.	0.			INFLATION SUPPORT
ROGER WILLIAMS UNIVERSITY							
1 EMPIRE STREET CYCLE - SUITE 513							OURSCHOOLS PVD ALLIANCE
PROVIDENCE, RI 02903	05-0277222	501(C)(3)	112,000.	0.			AND INFLATION SUPPORT

		ON FOUNDATIO		, (O-l-	- d. d. 1 (F 000)   D.		4-2755323 Page
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule i (Form 990), Pa 	rt II.)	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STUDENTS FOR EDUCATIONAL JUSTICE							
(SEJ) - STUDENTS FOR EDUCATIONAL					A		STUDENTS FOR EDUCATIONAL
JUSTICE C/O WCC 1253 WHITNEY							JUSTICE: AYVL GRANT YEAR
AVENUE - HAMDEN, CT 06517	81-4845924	501(C)(3)	112,000.	0.			3 AND INFLATION SUPPORT
REVERE YOUTH IN ACTION (TSNE)							
PO BOX 13							SUPPORTING AND GROWING
REVERE, MA 02151	04-3286531	501(C)(3)	107,087.	0.			YOUTH VOICE
GIVESANKOFA INC.							
P.O. BOX 15128							
CHICAGO, IL 60615	87-3933799	501(C)(3)	105,600.	0.			DEVELOP CAPACITY COACHING
			, -				ADVANCING EQUITABLE
RANDOLPH PUBLIC SCHOOLS							EDUCATION FOR BIPOC
40 HIGHLAND AVE							STUDENTS BY REDUCING
RANDOLPH, MA 02368	04-6001275	PUBLIC SCHOOL	105,001.	0.			SYSTEMIC BARRIERS TO
ACCELERATE CHANGE, INC.							
294 WASHINGTON STREET, SUITE 500							OPERATING SUPPORT (CIVIC
BOSTON, MA 02108	82-3400062	501(C)(3)	100,000.	0.			ENGAGEMENT)
BLACK FUTURES LAB (CHINESE							
PROGRESSIVE ASSOCIATION) - CHINESE							
PROGRESSIVE ASSOCIATION C/O BLACK	04 0604560	504 (5) (0)					BLACK FUTURES LAB (CIVIC
FUTURES LAB 1042 GRANT STREET, S -	04-2631569	501(C)(3)	100,000.	0.			ENGAGEMENT EFFORTS)
BLUE HILLS CIVIC ASSOCIATION							
410 HOMESTEAD AVENUE			ľ				SUPPORTING AND GROWING
	06-0876558	501/0)/3)	100,000.	0.			YOUTH VOICE
HARTFORD, CT 06112	00-0070558	501(C)(3)	100,000.	0.			HOUTH VOICE
COLORADO NONPROFIT DEVELOPMENT							
CENTER - 789 N SHERMAN ST, STE 250							CHANGE MATRIX - EXPANDIN
- DENVER, CO 80203-3539	84-1493585	501(C)(3)	100,000.	0.			THE BENCH OP SUPPORT 202
OH OHUDDWING HOD A DDHAW (INCHES IN							
CT STUDENTS FOR A DREAM (UNITED WE							GUDDODETNA AND COOKER
DREAM) - 2470 FAIRFIELD AVE -	46 2016565	E01/G)/2)	100 000	_			SUPPORTING AND GROWING
BRIDGEPORT, CT 06605	46-2216565	DOT(G)(3)	100,000.	0.			YOUTH VOICE

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EDUCATION LEADERS OF COLOR, INC.							
3680 WILSHIRE BLVD, SUITE P04-1052							
LOS ANGELES., CA 90010	81-2253548	501(C)(3)	100,000.	0.			OPERATING SUPPORT
no mondo, en seele	01 2233310	301(0)(3)	100,000.	•			or marring borrows
ELEVATED THOUGHT FOUNDATION INC.							
15 UNION ST. SUITE #120							SUPPORTING AND GROWING
LAWRENCE, MA 01840	27-3519031	501(C)(3)	100,000.	0.			YOUTH VOICE
,			,				
GRANITE STATE ORGANIZING PROJECT							
383 BEECH STREET							SUPPORTING AND GROWING
MANCHESTER, NH 03103	47-0873896	501(C)(3)	100,000.	0.			YOUTH VOICE
				,			
LATINOJUSTICE PRLDEF							
475 RIVERSIDE DR., SUITE 1901							LATINOJUSTICE (CIVIC
NEW YORK, NY 10115	13-2722664	501(C)(3)	100,000.	0.			ENGAGEMENT EFFORTS)
MASSACHUSETTS BUDGET & POLICY							DELIVERING ON EQUITY
CENTER - ONE STATE STREET, SUITE							COLLECTIVE (CIVIC
1250 - BOSTON, MA 02109	04-2967537	501(C)(3)	100,000.	0.			ENGAGEMENT)
NEW HAMPSHIRE CHARITABLE							
FOUNDATION - 37 PLEASANT STREET -	00 6005605	E01/G)/2)	100 000	•			
CONCORD, NH 03301	02-6005625	501(C)(3)	100,000.	0.			CIVIC ENGAGEMENT
OUTRIGHT VERMONT							
PO BOX 5235							SUPPORTING AND GROWING
BURLINGTON, VT 05402	03-0323843	501(C)(3)	100,000.	0.			YOUTH VOICE
PORTLAND EMPOWERED (FOUNDATION FOR	20 0020040		100,000.	· ·			10000
PORTLAND PUBLIC SCHOOLS) - 353							
CUMBERLAND AVE - PORTLAND, ME							SUPPORTING AND GROWING
04101	22-3179738	501(C)(3)	100,000.	0.			YOUTH VOICE
			,				
PROVIDENCE STUDENT UNION							
769 WESTMINSTER STREET							SUPPORTING AND GROWING
PROVIDENCE, RI 02903	45-5052229	501(C)(3)	100,000.	0.			YOUTH VOICE

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	Tago
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PROVIDENCE YOUTH STUDENT MOVEMENT							
PO BOX 6487 PROVIDENCE, RI 02904	65-1224536	501(C)(3)	100,000.	0.			SUPPORTING AND GROWING YOUTH VOICE
REVERE YOUTH IN ACTION (TSNE)							
PO BOX 13							SUPPORTING AND GROWING
REVERE, MA 02151	04-3286531	501(C)(3)	100,000.	0.			YOUTH VOICE
ROIL DBA MAINE INSIDE OUT PO BOX 1062							SUPPORTING AND GROWING
LEWISTON, ME 04243	83-0462687	501(C)(3)	100,000.	0			YOUTH VOICE
SCHOOL BOARD PARTNERS							
3423 MARIGNY STREET							
NEW ORLEANS, LA 70122	83-2568080	501(C)(3)	100,000.	0.			OPERATING SUPPORT
STUDENT IMMIGRANT MOVEMENT (RESIST INC.) - 42 SEAVERNS AVE - JAMAICA							SUPPORTING AND GROWING
PLAIN, MA 02130	04-2433182	501 (C) (3)	100,000.	0.			YOUTH VOICE
IMIN, MY 02130	04 2433102	301(0)(3)	100,000.	0.			TOOTH VOICE
THE LEADERSHIP ACADEMY							
10-27 46TH AVENUE, 1ST FLOOR							
LONG ISLAND CITY, NY 11101	03-0503570	501(C)(3)	100,000.	0.			OPERATING SUPPORT
THE ROOT SOCIAL JUSTICE CENTER							
28 WILLIAMS STREET				_			SUPPORTING AND GROWING
BRATTLEBORO, VT 05301	82-1917956	501(C)(3)	100,000.	0.			YOUTH VOICE
UNBOUNDED LEARNING, INC.							SUPPORT EDUCATOR
P.O. BOX 69046							ATTENDANCE AT STANDARDS
BALTIMORE, MD 21264	47-5223320	501(C)(3)	100,000.	0.			INSTITUTE
·			,				
WORCESTER STATE UNIVERSITY							
FOUNDATION - 486 CHANDLER STREET -							SUPPORTING AND GROWING
WORCESTER, MA 01602	22-3248067	501(C)(3)	100,000.	0.			YOUTH VOICE

Part II Continuation of Grants and Other		mestic Organizations		overnments (Sch	edule I (Form 990), Pa	rt II.)	Fage 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YOUTH IN ACTION, INC							
672 BROAD ST							SUPPORTING AND GROWING
PROVIDENCE, RI 02907	05-0495230	501(C)(3)	100,000.	0.			YOUTH VOICE
,			,				
ROCKEFELLER PHILANTHROPY ADVISORS,							
INC 6 WEST 48TH STREET, 10TH							PARTNERSHIP FOR THE
FLOOR - NEW YORK, NY 10036	13-3615533	501(C)(3)	95,000.	0.			FUTURE OF LEARNING
CONNECTICUT COUNCIL FOR							
PHILANTHROPY - 75 CHARTER OAK AVE.							SUPPORT ORGANIZING WORK
1-205 - HARTFORD, CT 06106	23-7024016	501(C)(3)	87,000.	0.			AND INFLATION SUPPORT
EDUCATION JUSTICE COALITION OF							
VERMONT (PEACE DEVELOPMENT FUND) -							SUPPORT EDUCATION JUSTICE
PO BOX 1280 - AMHERST, MA							COALITIONS AND INFLATION
01004-1280	04-2738794	501(C)(3)	87,000.	0.			SUPPORT
MASSACHUSETTS COMMUNITIES ACTION							SUPPORT EDUCATION JUSTICE
NETWORK - 14 CUSHING AVE -							COALITIONS AND INFLATION
DORCHESTER, MA 02125	04-2863903	501(C)(3)	87,000.	0.			SUPPORT
NATIONAL ECONOMIC AND SOCIAL							
RIGHTS INITIATIVE - 85 COLUMBIA							
STREET, APT 5B, - NEW YORK, NY							DIGNITY IN SCHOOLS AND
10002	73-1714118	501(C)(3)	87,000.	0.			INFLATION SUPPORT
BELOVED COMMUNITY							
3157 GENTILLY BLVD. #176							CROSS-GRANTEE LEARNING
NEW ORLEANS, LA 70122	81-3388287	501(C)(3)	66,900.	0.			EVENT 2022
CHINATOWN PEOPLE PROGRESSIVE							SUPPORT EDUCATION JUSTICE
ASSOCIATION - 28 ASH ST - BOSTON,	04 0604560	504 (5) (0)					COALITIONS AND INFLATION
MA 02111	04-2631569	DOT(C)(3)	62,000.	0.			SUPPORT
COALITION FOR A MULTILINGUAL RHODE							
ISLAND (OLNEYVILLE NEIGHBORHOOD							SUPPORT EDUCATION JUSTICE
ASSOCIATION) - C/O RIFLA PO BOX		504 (5) (0)		_			COALITIONS AND INFLATION
200 - PEACE DALE, RI 02883	83-0434706	DOT(G)(3)	62,000.	0.			SUPPORT

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FAITHACTS FOR EDUCATION					_		SUPPORT EDUCATION JUSTICE
857 POST ROAD SUITE 310							COALITIONS AND INFLATION
FAIRFIELD, CT 06824	47-2150020	501(C)(3)	62,000.	0.			SUPPORT
GREATER BOSTON LATINO NETWORK							SUPPORT EDUCATION JUSTICE
(SOCIEDAD LATINA) - 1530 TREMONT							COALITIONS AND INFLATION
STREET - BOSTON, MA 02120	04-2678255	501(C)(3)	62,000.	0.			SUPPORT
PRISM							
1423 BROADWAY #271							PRISM CORE SUPPORT FOR
OAKLAND, CA 94612	82-1772450	501(C)(3)	62,000.	0.			EDUCATION PROGRAMMING '23
THE WBUR GROUP - BOSTON UNIVERSITY							
(TRUSTEES OF BOSTON UNIVERSITY) -							
890 COMMONWEALTH AVENUE, 3RD FLOOR							WBUR CORE SUPPORT FOR
- BOSTON, MA 02215	04-2103547	501(C)(3)	62,000.	0.			EDUCATION PROGRAMMING '23
WORCESTER EDUCATION COLLABORATIVE							
(UNITED WAY OF CENTRAL							SUPPORT EDUCATION JUSTICE
MASSACHUSETTS) - 484 MAIN STREET,	04 0104015	F01/a)/2)	60 000	,			COALITIONS AND INFLATION
SUITE 300 - WORCESTER, MA 01608	04-2104017	501(C)(3)	62,000.	0.			SUPPORT
LAWYERS FOR CIVIL RIGHTS							
61 BATTERYMARCH STREET, 5TH FLOOR							SUPPORT VENEZUELAN
BOSTON, MA 02110	04-3490614	501(C)(3)	60,000.	0.			COMMUNITY
BVM CAPACITY BUILDING INSTITUTE							
4751 BEST RD, STE 200							
ATLANTA, GA 30337	82-3835203	501(C)(3)	50,000.	0.			OPERATING SUPPORT
HOLLIMY, DOADWAD							
EQUITY ROADMAP							CAMBRIDGE VOUNT AND
15 CARLISLE ST	05 4006077	E01/G\/3\	F0 000	0			CAMBRIDGE YOUTH AND
CAMBRIDGE, MA 02139	85-4226877	DOT(C)(3)	50,000.	0.			CAREGIVERS CONNECTS
THE HIGHLAND PROJECT							
71 W 85TH ST., UNIT 1A							
NEW YORK, NY 10024	85-4241927	501(C)(3)	50,000.	0.			OPERATING SUPPORT

		ON FOUNDATIO		, (O-l-			4-2755323 Page
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations 	and Domestic Go	vernments (Scho	edule I (Form 990), Pa I	rt II.) T	I
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE NEW UNIVERSAL WISDOM AND							
LEADERSHIP INSTITUTE (SPRINGBOARD					A		
TO OPPORTUNITIES) - 490 LAKE PARK							
AVE OAKLAND, CA 94610	46-1917760	501(C)(3)	50,000.	0.			OPERATING SUPPORT
TNTP, INC.							
500 7TH AVENUE, 8TH FLOOR							
,	12 2050150	E01/G)/3)	F0 000	0			THE DEGENDAL GUDDODE
NEW YORK, NY 10018	13-3850158	501(0)(3)	50,000.	0.			TNTP RESEARCH SUPPORT
WOMEN'S FUNDING NETWORK							
548 MARKET ST PMB 81689							SUPPORTING WOMEN'S FUNDS
	41 1605134	E01/G)/3)	F0 000				
SAN FRANCISCO, CA 94104	41-1685134	DUI(C)(3)	50,000.	0.			IN NEW ENGLAND
YOUTH MENTORING ACTION NETWORK							
P.O. BOX 1633	07 45 60010	E01/G)/2)	50.000				BLACK GIRLS (EM) POWER
CLAREMONT, CA 91711	27-4560912	501(C)(3)	50,000.	0.			(BGE)
ALLIANCE OF RHODE ISLAND SOUTHEAST							SUPPORT ELEMENTARY &
ASIANS FOR EDUCATION - 151							SECONDARY SCHOOL
BROADWAY, SUITE 305 - PROVIDENCE,				_			EMERGENCY RELIEF FUND
RI 02903	81-4458558	501(C)(3)	45,000.	0.			ACTIVITY
							SUPPORT ELEMENTARY &
BRIDGEPORT GENERATION NOW							SECONDARY SCHOOL
1119 MAIN STREET							EMERGENCY RELIEF FUND
BRIDGEPORT, CT 06604	81-4240436	501(C)(3)	45,000.	0.			ACTIVITY
							SUPPORT ELEMENTARY &
BROCKTON INTERFAITH COMMUNITY			V .				SECONDARY SCHOOL
1350 PLEASANT STREET							EMERGENCY RELIEF FUND
BROCKTON, MA 02301	22-3135464	501(C)(3)	45,000.	0.			ACTIVITY
							SUPPORT ELEMENTARY &
RACCE (ACHIEVE HARTFORD!)							SECONDARY SCHOOL
14 STANROD AVE							EMERGENCY RELIEF FUND
WATERBURY, CT 06704	45-0499390	501(C)(3)	45,000.	0.			ACTIVITY
YOUTHBUILD PREPARATORY ACADEMY							
217 WESTMINSTER STREET, 3RD FLOOR							
PROVIDENCE, RI 02903	81-3957029	501(C)(3)	45,000.	0.			OPERATING SUPPORT

Part II Continuation of Grants and Other A		mestic Organizations	-	vernments (Sch	edule I (Form 990). Pa		74-2733323 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EASTERN CONNECTICUT STATE							
UNIVERSITY FOUNDATION - 83 WINDHAM STREET P.O. BOX 431 - WILLIMANTIC, CT 06226	23-7111053	501(C)(3)	40,000.	0.	1		STUDENTS OF COLOR & EQUITY GRANT
EDUCATION LEADERS OF COLOR, INC. 3680 WILSHIRE BLVD, SUITE P04-1052 LOS ANGELES., CA 90010	81-2253548	501(C)(3)	40,000.	0.	9		SUPPORT LEADERS OF COLOR WORKING IN K12
HIGHLANDER INSTITUTE P.O. BOX 9207 PROVIDENCE, RI 02940	22-3115046	501(C)(3)	40,000.	0.			OPERATING SUPPORT
MARGARITA MUNIZ ACADEMY FOUNDATION 20 CHILD STREET JAMAICA PLAIN, MA 02130	80-0827704	501(C)(3)	40,000.	0.			GENERAL OPERATING
PORTLAND EMPOWERED (FOUNDATION FOR PORTLAND PUBLIC SCHOOLS) - 353 CUMBERLAND AVE - PORTLAND, ME 04101	22-3179738	501(C)(3)	40,000.	0.			PORTLAND EMPOWERED PARTICIPATORY BUDGETING FOR ARP FUNDING
READING IS FUNDAMENTAL 750 FIRST ST, NE, SUITE 920 WASHINGTON, DC 20002	52-0976257		40,000.	0.			GENERAL OPERATING FUND
THE EDUCATION TRUST 1501 K STREET NW, SUITE 200 WASHINGTON, DC 20005	52-1982223	501(C)(3)	40,000.	0.			TECHNICAL ASSISTANCE FOR ESSER GRANTEES
GROWTH PHILANTHROPY NETWORK 1345 AVENUE OF THE AMERICAS 33RD FL NEW YORK, NY 10105	42-1625224	501(C)(3)	35,000.	0.			OPERATING SUPPORT
EDUCATION JUSTICE COALITION OF VERMONT (PEACE DEVELOPMENT FUND) - PO BOX 1280 - AMHERST, MA							SUPPORT ELEMENTARY & SECONDARY SCHOOL EMERGENCY RELIEF FUND
01004-1280	04-2738794	501(C)(3)	30,000.	0.			ACTIVITY

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WIDMINAL LEADNING AGADEMY GUADMED					, , , ,		
VIRTUAL LEARNING ACADEMY CHARTER					<b>A</b>		
SCHOOL - 30 LINDEN STREET P.O. BOX	FC 2660724	E01/G)/2)	20.000	0			
1050 - EXETER, NH 03833	56-2668724	501(C)(3)	30,000.	0.			STRATEGIC PROJECTS
AFRICAN COMMUNITY EDUCATION							
PROGRAM - 484 MAIN STREET, SUITE	14-1970474	E01/G\/2\	25 000	0			ACE CIRCLES OF GROWTH
355 - WORCESTER, MA 01608	14-19/04/4	501(C)(3)	25,000.	0.			ACE CIRCLES OF GROWTH
BUILDING AUDACITY							
75 ALLEN AVE							
LYNN, MA 01902	83-4650961	501/01/31	25,000.				WELLNESS RESPONSE
HINN, MA 01902	03-4030301	501(0)(3)	25,000.	0,			WELLINESS KESFONSE
BURLINGTON SCHOOL DISTRICT							
150 COLCHESTER AVENUE							YOUTH VOICE IN SCHOOL
BURLINGTON, VT 05401	17_1351661	PUBLIC SCHOOL	25,000.	0.			ENGAGEMENT
CAMBRIDGE FAMILIES OF COLOR	47 1331004	robbic belicon	25,000.	0.			ENGAGEMENT
COALITION (BUILDING AUDACITY) - 36							
COOLIDGE HILL ROAD - CAMBRIDGE, MA							
02138	83-4650961	E01/G)/2)	25,000.	0.			CFCC CAPACITY BUILDING
02136	83-4650961	501(C)(3)	25,000.	٠.			CFCC CAPACITY BUILDING
CENTER FOR EFFECTIVE PHILANTHROPY							
675 MASSACHUSETTS AVENUE, 7TH FLOOR							
CAMBRIDGE, MA 02139	04-3523528	501/C)/3)	25,000.	0.			OPERATING SUPPORT
COALITION FOR A MULTILINGUAL RHODE	04-3323320	501(C)(3)	23,000.	0.			COALITION FOR A
ISLAND (OLNEYVILLE NEIGHBORHOOD							MULTILINGUAL RHODE ISLA
ASSOCIATION) - C/O RIFLA PO BOX	02 0424506	E01/a)/2)	05.000				CAPACITY BUILDING:
200 - PEACE DALE, RI 02883	83-0434706	501(C)(3)	25,000.	0.			STRATEGIC PLANNING
GOLLA DODAMINE DEGOLUMIONG COOKS							
COLLABORATIVE RESOLUTIONS GROUP							
P.O. BOX 931	04 2000555	501/61/21	0.7.00	_			HEALING JUSTICE, HEALTHY
GREENFIELD, MA 01302	84-3280623	501(C)(3)	25,000.	0.			FOUNDATIONS
GONDALDALEM TANGA GENERAL LAD							
COMMUNITY ENGAGEMENT LAB							
41 SUMMER ST.	45 2060566	E01/a)/2)	0	-			CREATIVE CONFLICT
MONTPELIER, VT 05602	45-3868526	DOT(C)(3)	25,000.	0.	1		TRANSFORMATION

(-) None and address of	/L.\ EIN!	(-) IDO ti	(-1) A	( - ) A	(C) NA attacatas	(a) Description of	(In) Demonstrate of supply
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONNECTICUT PUBLIC, INC.							
1049 ASYLUM AVE.							NEW ENGLAND NEWS
HARTFORD, CT 06105	06-0758938	501(C)(3)	25,000.	0.			COLLABORATIVE
			,				
DANA FARBER CANCER INSTITUTE							SAJNI CHAKRABARTI FUND
10 BROOKLINE PL WEST 6TH FL							FOR PEDIATRIC BRAIN TUMO
BROOKLINE, MA 02445	04-2263040	501(C)(3)	25,000.	0.			RESEARCH
EDITORIAL PROJECTS IN EDUCATION,							
INC 6935 ARLINGTON ROAD, STE.							
100 - BETHESDA, MD 20814	53-0246895	501(C)(3)	25,000.	0.			OPERATING SUPPORT
EDUCATION JUSTICE COALITION OF							
VERMONT (PEACE DEVELOPMENT FUND) -							
PO BOX 1280 - AMHERST, MA							CREATING COLLECTIVE
01004-1280	04-2738794	501(C)(3)	25,000.	0.			HEALING AND MOVEMENT
ENCHANTED CIRCLE THEATER							
4 OPEN SQUARE WAY STUDIO #206							YOUTH BUILT STRATEGIES
HOLYOKE, MA 01040	04-2685213	501(C)(3)	25,000.	0.			FOR HEALING & JUSTICE
EVERETT PUBLIC SCHOOLS							
121 VINE STREET							EVERETT PUBLIC SCHOOLS
EVERETT, MA 02149	04_6001386	PUBLIC SCHOOL	25,000.	0.			PEER MEDIATION PROGRAM
EVEREII, MA UZI49	04-0001300	FOBILC SCHOOL	23,000.	0.			FEER MEDIATION PROGRAM
FAITHACTS FOR EDUCATION			)				
857 POST ROAD SUITE 310							
FAIRFIELD, CT 06824	47-2150020	501(C)(3)	25,000.	0.			CAPACITY BUILDING SUPPORT
	47 2130020	301(0)(3)	23,000.	٠.			emmerri Bornbrid Borrok
FOUNDATION FOR PORTLAND PUBLIC							BUILDING STUDENT CAPACITY
SCHOOLS - 353 CUMBERLAND AVENUE -							AS RESTORATIVE JUSTICE
PORTLAND, ME 04101	22-3179738	501(C)(3)	25,000.	0.			LEADERS
	== ==================================		25,500.	•			
GRANITE STATE ORGANIZING PROJECT							
383 BEECH STREET							YOUNG ORGANIZERS UNITED
MANCHESTER, NH 03103	47-0873896	501(C)(3)	25,000.	0.			STRATEGIC PLAN

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	overnments (Sch	edule I (Form 990), Pa	rt II.)	Tago i
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GRANTMAKERS FOR EDUCATION							
400 SE 103RD DR #33348							GFE EQUITY + GRANTMAKING
PORTLAND, OR 97216	33-0919329	501(C)(3)	25,000.	0.			IMPACT GROUP
,			,				
GREAT SCHOOLS PARTNERSHIP							
482 CONGRESS STREET, SUITE 500							
PORTLAND, ME 04101	26-3834610	501(C)(3)	25,000.	0.			OPERATING SUPPORT
GREATEST MINDS (TALENTED AND							
GIFTED ASSOCIATION) - 89 SOUTH							
STREET SUITE 601 - BOSTON, MA							
02111	27-1793806	501(C)(3)	25,000.	0.			COMMUNITY VOICES PROJECT
HARTFORD YOUTH SCHOLARS							
129 ALLEN PL	20 2405171	E01/G\/2\	25 000	0.			GENERAL GURRORE
HARTFORD, CT 06106	20-3495171	301(C)(3)	25,000.	0.			GENERAL SUPPORT
HEARING YOUTH VOICES (A BETTER WAY							
FOUNDATION) - P. O. BOX 615 - NEW							SCHOOLS THAT WORK FOR US-
LONDON, CT 06320	06-1576383	501(C)(3)	25,000.	0.			FULL SAFETY
•				-			
LATINOS FOR EDUCATION							
PMB 91135							LATINOS FOR EDUCATION MA
BOSTON, MA 02115-3153	81-2883649	501(C)(3)	25,000.	0.			STRATEGIC PLANNING 2022
							KIDS HELPING KIDS:
MAINE IMMIGRANT AND REFUGEE							STUDENT-LED RESTORATIVE
SERVICES - 256 BARTLETT STREET -							RESPONSE TO EXCLUSIONARY
LEWISTON, ME 04240	26-3099485	501(C)(3)	25,000.	0.			DISCIPLINE
W1 6 3 3 W 4 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7							
MASSACHUSETTS COMMUNITIES ACTION							
NETWORK - 14 CUSHING AVE -	04 2062002	E01/C)/2)	25 000	_			CADACIES BUILDING GUDDODE
DORCHESTER, MA 02125 MASSACHUSETTS EDUCATION JUSTICE	04-2863903	301(C)(3)	25,000.	0.			CAPACITY BUILDING SUPPORT
ALLIANCE - EDUCATION FUND (RESIST							
INC.) - 375 CENTRE STREET -							
BOSTON, MA 02130	04-2433182	501(C)(3)	25,000.	0.			CAPACITY BUILDING SUPPORT
, 0220	1 21 2100102		25,000.	· ·	l .	L	

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Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa I	rt II.) T	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MENTOR RHODE ISLAND 2065 WARWICK AVENUE, UNIT 1 WARWICK, RI 02889	05-0443260	501(c)(3)	25,000.	0.	1		RELATIONSHIPS AT THE CENTER: A MENTORING APPROACH
MISSIONSAFE: A NEW BEGINNING, INC. PO BOX 190939 ROXBURY, MA 02119-0019	04-3457195	501(c)(3)	25,000.	0.	Q		TEAM BUILDING TRIPS FOR FEUDING YOUTH GANGS
NATIONAL COMMITTEE FOR RESPONSIVE PHILANTHROPY - 1900 L STREET NW SUITE 825 - WASHINGTON, DC 20036	52-1072749	501(C)(3)	25,000.	0.			OPERATING SUPPORT
NATIONAL ECONOMIC AND SOCIAL RIGHTS INITIATIVE - 85 COLUMBIA STREET, APT 5B, - NEW YORK, NY 10002	73-1714118	501(C)(3)	25,000.	0.			DIGNITY IN SCHOOLS CAMPAIGN STRATEGIC PLANNING
NEW HAMPSHIRE PUBLIC RADIO 2 PILLSBURY ST., 6TH FLOOR CONCORD, NH 03301	02-0338667	501(C)(3)	25,000.	0.			EDUCATION REPORTING
NORTH AMERICAN COUNCIL FOR ONLINE LEARNING - 1100 N. GLEBE RD. SUITE 1010 - ARLINGTON, VA 22201	20-0310109	501(C)(3)	25,000.	0.			EDUCATION POLICY AND PRACTICE IN PURSUIT OF EQUITY
PROGRESO LATINO 626 BROAD ST. CENTRAL FALLS, RI 02863-2835	05-0380608	501(C)(3)	25,000.	0.			PROGRESO LATINO, INC. STRATEGIC PLANNING PROJECT
PROVIDENCE STUDENT UNION 769 WESTMINSTER STREET PROVIDENCE, RI 02903	45-5052229	501(C)(3)	25,000.	0.			PASS RESTORATIVE JUSTICE TRAINING AND YOUTH-LED WORKSHOPS PROJECT
RESTORATIVE JUSTICE PROJECT MAINE 39A SPRING STREET BELFAST, ME 04915	26-1508416	501(c)(3)	25,000.	0.			ADDRESSING RACIAL HARM IN SCHOOLS USING RESTORATIVE PRACTICES

Part II Continuation of Grants and Other							
(a) Name and address of organization or government	( <b>b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RHODE ISLAND FOR COMMUNITY AND							EMPOWERING YOUTH AS
JUSTICE (RICJ) - 271 NORTH MAIN							RESTORATIVE JUSTICE
STREET - PROVIDENCE, RI 02903	75-3180937	501(C)(3)	25,000.	0.			FACILITATORS FOR SCHOOLS
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
RHODE ISLAND KIDS COUNT							ISSUE BRIEF ON
ONE UNION STATION							MULTILINGUAL LEARNERS IN
PROVIDENCE, RI 02903	06-1485449	501(C)(3)	25,000.	0.			RHODE ISLAND
							YOUTH LEADERS - CENTERIN
SOCIEDAD LATINA							ARTIVISM, VIOLENCE
1530 TREMONT STREET							PREVENTION, AND WELLNESS
ROXBURY, MA 02120	04-2678255	501(C)(3)	25,000.	0.			IN A POST-PANDEMIC WORLD
SOUTHEAST ASIAN COALITION OF				,			
CENTRAL MASSACHUSETTS - 484 MAIN							
ST. SUITE 400 - WORCESTER, MA							STRATEGIC PLANNING
01608	04-3393955	501(C)(3)	25,000.	0.			CAPACITY BUILDING
THE YOUNG PEOPLE'S PROJECT							
99 BISHOP ALLEN DRIVE							STRATEGIC PLANNING
CAMBRIDGE, MA 02139	64-0939004	501(C)(3)	25,000.	0.			CAPACITY BUILDING
MDEE CMDEEM VOLUMI							
TREE STREET YOUTH 144 HOWE STREET							
	46-0942854	501/C)/3)	25,000.	0.			RESTORATIVE DESIGN PILOT
LEWISTON, ME 04240 UNITED AMERICAN INDIANS OF NEW	40-0342034	501(C)(3)	23,000.	0.			RESTORATIVE DESIGN FILOT
ENGLAND (PEOPLES RIGHTS FUND) -							
147 WEST 27TH STREET - NEW YORK,							
NY 10011	13-3270831	501(C)(3)	25,000.	0.			OPERATING SUPPORT
	13 3270031	301(0)(3)	23,000.	•			STRENGTHENING UCA'S BOAR
URBAN COMMUNITY ALLIANCE							OF DIRECTORS, EXECUTIVE
446 BLAKE ST.							TEAM, AND PROGRAM STAFF
NEW HAVEN, CT 06515	06-1324343	501(C)(3)	25,000.	0.			VIA THE STRATEGIC PLAN
•			, ,	-			
WABANAKI YOUTH IN SCIENCE							
P.O BOX 215							STRATEGIC PLANNING
OLD TOWN, ME 04468	47-5239057	501(C)(3)	25,000.	0.			CAPACITY BUILDING

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WOMEN ENCOURAGING EMPOWERMENT,							WOMEN ENCOURAGING
INC 50 WALNUT STREET P.O. BOX							EMPOWERMENT STRATEGIC
13 - REVERE, MA 02151	04-3286531	501(C)(3)	25,000.	0.			PLANNING FY23
WORCESTER EDUCATION COLLABORATIVE							
(UNITED WAY OF CENTRAL							WORCESTER EDUCATION
MASSACHUSETTS) - 484 MAIN STREET							EQUITY ROUNDTABLE
SUITE 300 - WORCESTER, MA 01608	04-2104017	501(C)(3)	25,000.	0.			STRATEGIC PLANNING
YOUNG WOMEN'S CHRISTIAN			, -				
ASSOCIATION OF LOWELL - 97 CENTRAL							
STREET, UNIT #302 - LOWELL, MA							ROAMING RESTORATIVE
01852	04-2105876	501(C)(3)	25,000.	0.			JUSTICE ART PROJECT
			,				
YOUTH IN ACTION, INC							SUSTAINING OUR EXPANSION
672 BROAD ST							INTO EQUITY THROUGH A
PROVIDENCE, RI 02907	05-0495230	501(C)(3)	25,000.	0.			FIVE-YEAR STRATEGIC PLAN
AFRICAN CARIBBEAN AMERICAN PARENTS							
OF CHILDREN WITH DISABILITIES,							
INC 49 WOODLAND STREET -							AFCAMP 2023 STRATEGIC
HARTFORD, CT 06105	06-1614989	501(C)(3)	24,695.	0.			PLANNING PROJECT
BMA TEN POINT, INC.							YOUTH HEALING TRAUMA
2010 COLUMBUS AVENUE							PROJECT: PREVENT &
ROXBURY, MA 02119	04-3499852	501(C)(3)	24,000.	0.			REPAIRING HARM
HARTFORD PUBLIC LIBRARY							
500 MAIN STREET							
HARTFORD, CT 06103	06-6026029	501(C)(3)	23,400.	0.			MINDFUL ARTS
LA COLABORATIVA							
318 BROADWAY	00 000555	501/61/21	0.1 0.0	-			
CHELSEA, MA 02150	22-2906521	501(C)(3)	21,000.	0.			OVERCOMING TRAUMA
BOSTON ALLIANCE OF LGBTQ+ YOUTH							
(BAGLY) - 28 COURT SQ - BOSTON, MA							BAGLY'S YOUTH LEADERSHIE
02108	04-2785336	E01/G)/2)	20,000.	0.			INITIATIVE CONFERENCE

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONTINUE COUNTY DOD							
CONNECTICUT COUNCIL FOR PHILANTHROPY - 75 CHARTER OAK AVE.							
1-205 - HARTFORD, CT 06106	23-7024016	501(C)(3)	20,000.	0.			CAPACITY BUILDING
ELM CITY MONTESSORI SCHOOL							
495 BLAKE STREET							WELCOMING ALL OF OUR
NEW HAVEN, CT 06515	46-3592780	PUBLIC SCHOOL	20,000.	0.			STUDENTS & FAMILIES
			, , ,				
GIRLS INC. OF THE VALLEY							
6 OPEN SQUARE WAY							THE "CAN'T DRAG US DOWN"
HOLYOKE, MA 01041	04-2748244	501(C)(3)	20,000.	0.			PROJECT
KEENE STATE COLLEGE							L
229 MAIN STREET	00 6000037	E01/G\/3\	20.000				EDUCATORS OF COLOR SUMME
KEENE, NH 03435	02-6000937	501(0)(3)	20,000.	0.			INSITUTE BEHIND THE MASK:
MANCHESTER HIGH SCHOOL							UNVEILING YOUR TRUE
134 MIDDLE TURNPIKE E.							AUTHENTIC SELF THROUGH
MANCHESTER, CT 06040	06-6001633	PUBLIC SCHOOL	20,000.	0.			COMMUNITY HEALING
,							
TRANSLATE GENDER							
25 MAIN STREET, SUITE 220							
NORTHAMPTON, MA 01060	87-2079264	501(C)(3)	20,000.	0.			TRANS JOY
WABANAKI PUBLIC HEALTH AND							
WELLNESS, INC ONE MERCHANTS							
PLAZA, SUITE 401 - BANGOR, ME							WPHW PASSAMAQUODDY YOUTH
04401	04-3337456	501(C)(3)	20,000.	0.			HEALING CIRCLES
YOUNG MAN WITH A PLAN (PREPARATORY							WOLDING MAN LITTER A DE LA
FOUNDATION, INC.) - 1178 RIVER	11 2600000	E01/a)/2)		•			YOUNG MAN WITH A PLAN
STREET - HYDE PARK, MA 02136	11-3690799	DUI(C)(3)	20,000.	0.			GOES TO 8TH GRADE
SPRINGFIELD PRIDE PARADE							
ORGANIZATION - 63 CHESTER ST -							
SPRINGFIELD, MA 01105	87-1620696	501(C)(3)	18,000.	0.			SAFE SUMMER PROGRAM

Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa T	rt II.) T	T
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MILTON HIGH SCHOOL - OFFICE OF EQUITY AND EDUCATIONAL SUPPORT SYSTEMS - 17 REBECCA LANDER DRIVE - MILTON, VT 05468	03-6000571	PUBLIC SCHOOL	17,700.	0.			DAY OF DISRUPTION: CENTERING AND CELEBRATING
REHEARSAL FOR LIFE PO BOX 300037 JAMAICA PLAIN, MA 02130	04-2786576		16,446.	0.	2		YOUTH UNSCRIPTED
ROXBURY YOUTHWORKS, INC. 841 PARKER STREET ROXBURY CROSSING, MA 02120	04-2733854	501(C)(3)	15,925.	0.			BEING UNITED IN LEADING OUR DESTINY (BUILD)'S WELLNESS PROJECT
BOSTON GREEN ACADEMY FOUNDATION 20 WARREN STREET BRIGHTON, MA 02135	46-4779019	501(C)(3)	15,500.	0.			THE JOY LAB
BANGOR HIGH SCHOOL 885 BROADWAY BANGOR, ME 04401	01-6000020	PUBLIC SCHOOL	15,000.	0.			EMPOWERING LGBTQIA+ YOUT AT BANGOR HIGH SCHOOL
BETA TAU ASSOCIATION, INC. 7064 E. TAMARON BLVD NEW ORLEANS, LA 70128	85-3184635	501(C)(3)	15,000.	0.			DD-JOHN H. JACKSON
EDUCATE MAINE 482 CONGRESS STREET SUITE 303 PORTLAND, ME 04101	20-3559947	501(C)(3)	15,000.	0.			ANNUAL EDUCATION INDICATORS FOR MAINE
MOUNTAIN COMMUNITIES SUPPORTING EDUCATION, DBA ALLIANCE FOR COMMUNITY TRANSFORMA - 215 SOUTH ST. SECOND FL BENNINGTON, VT	03-0359264	501(C)(3)	15,000.	0.			CENTERING JOY THROUGH BELONGING: THE YOURSPACE SERIES
RIGHTS & DEMOCRACY EDUCATION FUND INC. DBA RIGHTS & DEMOCRACY INSTITUTE - 70 S. WINOOSKI AVE. BOX #205 - BURLINGTON, VT 05401	47-5375511		15,000.	0.			SUPPORT ELEMENTARY & SECONDARY SCHOOL EMERGENCY RELIEF FUND ACTIVITY

( ) )	4 ) = 1)	( ) 100			(6) 1.4	( ) 5	(1)
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DOCUMENT OF THE PARTY AND THE PARTY OF THE P							
ROCKEFELLER PHILANTHROPY ADVISORS,							
INC 6 WEST 48TH STREET, 10TH FLOOR - NEW YORK, NY 10036	13-3615533	501/01/31	15,000.	0.			SHARED SYSTEMS INITIATIV
FLOOR - NEW TORK, NI 10030	13-3013333	501(0/(3/	13,000.	0.			SHAKED SISIEMS INITIATIV
SKOWHEGAN SCHOOL OF PAINTING &							
SCULPTURE - 136 WEST 22ND STREET -							SKOWHEGAN SCHOLARSHIP
NEW YORK, NY 10011	01-0263908	501(C)(3)	15,000.	0.			PROGRAM
			10,000.				
RIVERZEDGE ARTS							
196 SECOND AVENUE							
WOONSOCKET, RI 02895	13-4206227	501(C)(3)	14,850.	0.			"WE SAY GAY!"
			, -				RESTORATIVE CIRCLES AT
GARDNER PILOT ACADEMY FOUNDATION							GPA: HEALTH AND HEALING
INC 30 ATHOL STREET - ALLSTON,							FOR OUR PERSEVERANT
MA 02134	83-3487611	501(C)(3)	14,427.	0.			COMMUNITY
PROVIDENCE COMMUNITY LIBRARY							
708 HOPE ST							
PROVIDENCE, RI 02906	36-4640304	501(C)(3)	13,000.	0.			CAMPS FOR QUEER YOUTH
ASIAN AMERICAN RESOURCE WORKSHOP							TRANSFORMATIVE JUSTICE &
42 CHARLES STREET, SUITE A							HEALING CIRCLES WITH
DORCHESTER, MA 02122	04-2707980	501(C)(3)	12,500.	0.			VIETNAMESE AMERICAN YOUT
BLUE HILLS CIVIC ASSOCIATION							
410 HOMESTEAD AVENUE							INFLATION OPERATING
HARTFORD, CT 06112	06-0876558	501(C)(3)	12,000.	0.			SUPPORT
DD I DGEDODE GENEDAETON NOW							
BRIDGEPORT GENERATION NOW							THE ARION OPERATING
1119 MAIN STREET	01 4040406	E01/G)/3\	10.000	•			INFLATION OPERATING
BRIDGEPORT, CT 06604	81-4240436	DUI(C)(3)	12,000.	0.			SUPPORT
CONNECTICUT PUBLIC, INC.							
1049 ASYLUM AVE.							INFLATION OPERATING
HARTFORD, CT 06105	06-0758938	501(C)(3)	12,000.	0.			SUPPORT

		ON FOUNDATIO		. (0.1-			4-2755323 Page
Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations 	and Domestic Go	vernments (Sch	edule I (Form 990), Pa 	rt II.) 	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CT STUDENTS FOR A DREAM (UNITED WE DREAM) - 2470 FAIRFIELD AVE - BRIDGEPORT, CT 06605	46-2216565	501(C)(3)	12,000.	0.			INFLATION OPERATING SUPPORT
ELEVATED THOUGHT FOUNDATION INC. 15 UNION ST. SUITE #120 LAWRENCE, MA 01840	27-3519031	501(C)(3)	12,000.	0.			INFLATION OPERATING SUPPORT
EMPOWER YOURSELF, LTD EMPOWER YOURSELF LTD 47 ROCK MEADOW BROCKTON, MA 02301	27-4762141	501(C)(3)	12,000.	0,			INFLATION OPERATING SUPPORT
GRANITE STATE ORGANIZING PROJECT 383 BEECH STREET MANCHESTER, NH 03103	47-0873896	501(C)(3)	12,000.	0.			INFLATION OPERATING SUPPORT
NEW HAMPSHIRE PUBLIC RADIO 2 PILLSBURY ST., 6TH FLOOR CONCORD, NH 03301	02-0338667	501(C)(3)	12,000.	0.			INFLATION OPERATING SUPPORT
OUTRIGHT VERMONT PO BOX 5235 BURLINGTON, VT 05402	03-0323843	501(C)(3)	12,000.	0.			INFLATION OPERATING SUPPORT
PALANTE RESTORATIVE JUSTICE PROGRAM (LIGHTHOUSE HOLYOKE) - THE PALANTE RESTORATIVE JUSTICE PROGRAM, HOLYOKE HIGH SCHOOL, 500	04-6001393	501(C)(3)	12,000.	0.			INFLATION OPERATING SUPPORT
PORTLAND EMPOWERED (FOUNDATION FOR PORTLAND PUBLIC SCHOOLS) - 353 CUMBERLAND AVE - PORTLAND, ME 04101	22-3179738	501(C)(3)	12,000.	0.			INFLATION OPERATING SUPPORT
PROVIDENCE STUDENT UNION 769 WESTMINSTER STREET PROVIDENCE, RI 02903	45-5052229	501(C)(3)	12,000.	0.			INFLATION OPERATING SUPPORT

Part II Continuation of Grants and Other		mestic Organizations		overnments (Scho	edule I (Form 990). Pa		14-2/33323 P	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
PROVIDENCE YOUTH STUDENT MOVEMENT								
PO BOX 6487							INFLATION OPERATING	
PROVIDENCE, RI 02904	65-1224536	501(C)(3)	12,000.	0.			SUPPORT	
PT PARTNERS (UNITED WAY COASTAL								
FAIRFIELD COUNTY, INC.) - 855 MAIN								
STREET, 10TH FLOOR - BRIDGEPORT,							INFLATION OPERATING	
CT 06604	06-0864341	501(C)(3)	12,000.	0.			SUPPORT	
	00 0001011		22,000.					
RACCE (ACHIEVE HARTFORD!)								
14 STANROD AVE							INFLATION OPERATING	
WATERBURY, CT 06704	45-0499390	501(C)(3)	12,000.	0.			SUPPORT	
REVERE YOUTH IN ACTION (TSNE)								
PO BOX 13							INFLATION OPERATING	
REVERE, MA 02151	04-3286531	501(C)(3)	12,000.	0.			SUPPORT	
RHODE ISLAND KIDS COUNT								
ONE UNION STATION							INFLATION OPERATING	
PROVIDENCE, RI 02903	06-1485449	501(C)(3)	12,000.	٥.			SUPPORT	
	00 1100115		3,,,,,	· ·				
RIVERA MEMORIAL FOUNDATION, INC.								
186 CHERRY STREET							INFLATION OPERATING	
WATERBURY, CT 06702	06-1536766	501(C)(3)	12,000.	0.			SUPPORT	
	00 1000700	561(6)(6)	22,000.	· ·				
ROIL DBA MAINE INSIDE OUT								
PO BOX 1062							INFLATION OPERATING	
LEWISTON, ME 04243	83-0462687	501(C)(3)	12,000.	0.			SUPPORT	
EDWIDION, IIE 01213	03 0102007	301(0)(3)	12,000.	· ·			DOTTORI	
STUDENT IMMIGRANT MOVEMENT (RESIST								
INC.) - 42 SEAVERNS AVE - JAMAICA							INFLATION OPERATING	
PLAIN, MA 02130	04-2433182	501(C)(3)	12,000.	0.			SUPPORT	
LIMIN, PA 02130	0.4 2433102	501(0)(3)	12,000.	0.			DOLLOKI	
THE ROOT SOCIAL JUSTICE CENTER								
28 WILLIAMS STREET							INFLATION OPERATING	
BRATTLEBORO, VT 05301	82-1917956	501(C)(3)	12,000.	0.			SUPPORT	
	1 32 1717730	P01(C/(J/	12,000.	ı			Och club I/F	

Part II Continuation of Grants and Other		mestic Organizations		overnments (Sch	edule I (Form 990) Pa		14-2/33323 Page		
(a) Name and address of organization or government	e and address of (b) EIN				(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORCESTER STATE UNIVERSITY FOUNDATION - 486 CHANDLER STREET - WORCESTER, MA 01602	22-3248067	501(C)(3)	12,000.	0.			INFLATION OPERATING SUPPORT		
YOUTH IN ACTION, INC 672 BROAD ST PROVIDENCE, RI 02907	05-0495230	501(C)(3)	12,000.	0.	9		INFLATION OPERATING SUPPORT		
NORTH SHORE ALLIANCE OF GLBTQ+ YOUTH (NAGLY) - 2 EAST INDIA SQUARE MALL, #121 - SALEM, MA 01970	04-3399331	501(C)(3)	10,793.	0.			QUEER OPEN STUDIOS		
YOUNG VOICES 204 WESTMINSTER STREET STE 2A PROVIDENCE, RI 02903	43-2103674	501(C)(3)	10,112.	0.			LGBTQ+ NETWORKING NIGHT		
ARC OF THE SOUTH SHORE 20 POND PARK RD HINGHAM, MA 02043	04-2302069	501(C)(3)	10,000.	0.			OPERATING SUPPORT		
ASIAN AMERICAN RESOURCE WORKSHOP 42 CHARLES STREET, SUITE A DORCHESTER, MA 02122	04-2707980	501(C)(3)	10,000.	0.			AARW: OPERATING SUPPORT		
BERKSHIRE TACONIC COMMUNITY FOUNDATION, INC 800 NORTH MAIN STREET - SHEFFIELD, MA 01257	06-1254469	501(C)(3)	10,000.	0.			EDUCATIONAL ATTAINMENT		
BIG PICTURE LEARNING 325 PUBLIC STREET PROVIDENCE, RI 02905	05-0485883	501(C)(3)	10,000.	0.			BIG PICTURE LEARNING BIG BANG CONFERENCE 2022		
BRIDGE OVER TROUBLED WATERS 47 WEST STREET BOSTON, MA 02111	04-2472126	501(C)(3)	10,000.	0.			OPERATING SUPPORT		

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant
organization or government		if applicable	cash grant	noncash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
CARY INSTITUTE OF ECOSYSTEM					A		
STUDIES - BOX AB - MILLBROOK, NY							MH-YES, MID HUDSON YOUNG
12545	22-3232968	501(C)(3)	10,000.	0.			ENVIROMENTAL STUDIES
CHILDREN'S DEFENSE FUND							
840 FIRST STREET, NE, SUITE 300							
WASHINGTON, DC 20002	52-0895622	501(C)(3)	10,000.	0.			FREEDOM SCHOOLS SUPPORT
COLLEGE BOUND DORCHESTER							
222 BOWDOIN STREET							
DORCHESTER, MA 02122	04-2383512	501(C)(3)	10,000.	0.			BOSTON UNCORNERED
EDVID GROD G							
EDVESTORS							17 MIL ANNULAL GOLIOGI ON MUL
142 BERKELEY, STREET SUITE 410	76-0794873	E01/a)/3)	10,000.	0.			17TH ANNUAL SCHOOL ON THE
BOSTON, MA 02116	70-0794873	301(C)(3)	10,000.	0.			MOVE PRIZE CEREMONY
FREEDOM HOUSE INC.							
5 CRAWFORD STREET							
DORCHESTER, MA 02121	04-2240448	501(C)(3)	10,000.	0.			OPERATING SUPPORT
GREATEST MINDS (TALENTED AND							GENERATIONS- AN
GIFTED ASSOCIATION) - 89 SOUTH							EXPLORATION OF BLACK
STREET SUITE 601 - BOSTON, MA							EDUCATION EXPERIENCES IN
02111	27-1793806	501(C)(3)	10,000.	0.			BOSTON-A
HARVARD UNIVERSITY, GRADUATE							
SCHOOL OF EDUCATION - PRESIDENT			<i>y</i>				
AND FELLOWS OF HARV - 13 APPIAN			1				
WAY - CAMBRIDGE, MA 02138	04-2103580	501(C)(3)	10,000.	0.			STUDENT FINANCIAL SUPPOR
HADE CUITADE MYCK EODGE TAG							
HYDE SQUARE TASK FORCE, INC. 30 SUNNYSIDE STREET							
	04-3118543	E01/G)/2)	10 000	0.			OPERATING SUPPORT
JAMAICA PLAIN, MA 02130	04-3110343	301(0)(3)	10,000.	0.			DIEMAIING SUPPORT
KEENE PRIDE							
411 WINCHESTER STREET, SUITE 1							
KEENE, NH 03431	88-1146040	501(C)(3)	10,000.	0.			KEENE PRIDE

Part II Continuation of Grants and Other A		nestic Organizations		vernments (Sche	edule I (Form 990), Pa		<u> </u>		
(a) Name and address of organization or government	(b) EIN (c) IRC section if applicable				(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LEE ACADEMY PILOT SCHOOL (CENTER FOR COLLABORATIVE EDUCATION) - 25 DUNBAR AVE - BOSTON, MA 02124	04-3241676	501(c)(3)	10,000.	0.			LEE ACADEMY PILOT SCHOOL:		
MASSACHUSETTS ADVOCATES FOR CHILDREN - 25 KINGSTON STREET, 2F - BOSTON, MA 02111	04-2488456	501(C)(3)	10,000.	0.	9		OPERATING SUPPORT		
MILTON PUBLIC SCHOOLS 25 GILE RD MILTON, MA 02186	04-6001228	PUBLIC SCHOOL	10,000.	0.			DEIB OPERATING SUPPORT		
MISS PORTER'S SCHOOL 60 MAIN ST. FARMINGTON, CT 06032	06-0646786	501(C)(3)	10,000.	0.			GENERAL SUPPORT		
NORTH AMERICAN COUNCIL FOR ONLINE LEARNING - 1100 N. GLEBE RD. SUITE 1010 - ARLINGTON, VA 22201	20-0310109	501(C)(3)	10,000.	0.			AURORA INSTITUTE ANNUAL SYMPOSIUM		
POLAND REGIONAL HIGH SCHOOL 1457 MAINE STREET POLAND, ME 04274	26-4196919	PUBLIC SCHOOL	10,000.	0.			PRHS OPPORTUNITY GRANT FUND		
QUEER YOUTH PROGRAM OF CONNECTICUT 433 FERN STREET WEST HARTFORD, CT 06107	87-3403494	501(C)(3)	10,000.	0.			OPERATING SUPPORT		
SALEM ACADEMY CHARTER SCHOOL FOUNDATION INC 45 CONGRESS ST. - SALEM, MA 01970	83-0368169		10,000.	0.			LGBTQ+ JOY THROUGH DRAG: SALEM ACADEMY'S FIRST ANNUAL COMMUNITY DRAG SHOW		
SAN ANTONIO AREA FOUNDATION 303 PEARL PARKWAY, SUITE 114 SAN ANTONIO, TX 78215	74-6065414	501(C)(3)	10,000.	0.			UVALDE STRONG FUND		

Part II Continuation of Grants and Other		nestic Organizations		overnments (Scho	edule I (Form 990), Pa		- 273333 Fage
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SCHOTT FOUNDATION FOR PUBLIC EDUCATION - ONE MIFFLIN PLACE - CAMBRIDGE, MA 02138	04-3457065	501(C)(3)	10,000.	0.			OPPORTUNITY TO LEARN NETWORK 2022 CONVENING
SISTERS UNCHAINED PO BOX 300902 JAMAICA PLAIN, MA 02130	85-1294087	501(C)(3)	10,000.	0.	9		INTERGENERATIONAL HEALING PROJECT
THE LATINA CIRCLE INC. 200 PORTLAND ST./WEWORK SUITE 500 BOSTON, MA 02114	82-4167948	501(C)(3)	10,000.	0.			CIVIC LEADERSHIP
THE LINKS FOUNDATION, INCORPORATED THE COMMONWEALTH (VA) CHAPTER THE LINKS, INC. PO BOX 27183 - RICHMOND, VA 2	52-1170830	501(C)(3)	10,000.	0.			YOUNG ACHIEVERS
WEYMOUTH FOR INCLUSION SOLIDARITY AND EQUITY WISE INC - 19 ROCKCROFT ROAD - WEYMOUTH, MA 02188	87-4610162	501(C)(3)	10,000.	0.			WISE INVESTMENT
XAVIER UNIVERSITY OF LOUISIANA 1 DREXEL DRIVE NEW ORLEANS, LA 70125	72-0635884	501(C)(3)	10,000.	0.			GIVE LOVE XAVIER FUND
CATHOLIC SCHOOLS FOUNDATION 67 BATTERYMARCH STREET, 6TH FLOOR BOSTON, MA 02110	22-2485502	C	9,000.	0.			BUILDING MINDS SCHOLARSHIP FUND (PREVIOUSLY KNOWN AS INNER CITY SCHOLARSHIP
EDUCATION LEADERS OF COLOR, INC. 3680 WILSHIRE BLVD, SUITE P04-1052 LOS ANGELES., CA 90010	81-2253548		9,000.	0.			EDLOC 2022 MATCHING
HARDY GIRLS HEALTHY WOMEN PO BOX 821 WATERVILLE, ME 04903	01-0538121	501(C)(3)	8,000.	0.			FEMINIST ACTION BOARD RETREATS

Part II Continuation of Grants and Other		mestic Organizations		vernments (Sch	edule I (Form 990), Pa		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE SIZER FOUNDATION, INC. 49 ANTIETAM STREET DEVENS, MA 01434	14-1874834	501(C)(3)	8,000.	0.			CELEBRATING AND SUPPORTING OUR LGBTQIA+ YOUTH
BOSTON CHINATOWN NEIGHBORHOOD CENTER, INC 38 ASH STREET - BOSTON, MA 02111	23-7209691	501(C)(3)	7,500.	0.	2		BCNC LANTERN FESTIVAL GALA
BREAKTHROUGH GREATER BOSTON 101 ROGERS STREET, SUITE 2A CAMBRIDGE, MA 02142	04-3307783	501(C)(3)	7,500.	0.			BREAKTHROUGHS IN EDUCATION
CRADLES TO CRAYONS 281 NEWTONVILLE AVE NEWTON, MA 02460	04-3584367	501(C)(3)	7,500.	0.			READY FOR SCHOOL INITIATIVE
ENGLISH FOR NEW BOSTONIANS 105 CHAUNCY STREET, 4TH FLOOR BOSTON, MA 02111	46-3202177	501(C)(3)	7,500.	0.			ENGLISH FOR NEW BOSTONIANS 20TH ANNIVERSARY EVENT SERIES
PROMISE EARLY EDUCATION 269 BATES STREET LEWISTON, ME 04240	23-7323306	501(C)(3)	7,500.	0.			EXPERIENTIAL, NATURE-BASED LEARNING
THE FOUNDATION CENTER DBA CANDID 32 OLD SLIP, 24TH FLOOR NEW YORK, NY 10005	13-1837418	501(C)(3)	7,500.	0.			GENERAL PROGRAM FUNDING
TREE STREET YOUTH 144 HOWE STREET LEWISTON, ME 04240	46-0942854	501(C)(3)	7,500.	0.			OPERATING SUPPORT 2022
TRUSTEES OF BOSTON COLLEGE 140 COMMONWEALTH AVENUE CHESTNUT HIL, MA 02467	04-2103545	501(C)(3)	7,500.	0.			LYNCH LEADERSHIP ACADEMY SYMPOSIUM: SCHOOLS FOR DIGNITY AND THE INTELLECTUAL TRADITION IN

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEACHERS COLLEGE COLUMBIA UNIVERSITY - 525 W. 120TH ST - NEW YORK, NY 10027	13-1624202	501(c)(3)	7,000.	0.	1		REIMAGINING EDUCATION SUMMER INSTITUTE
SOUTH SHORE HOSPITAL 55 FOGG RD SOUTH WEYMOUTH, MA 02190	04-2769210	501(C)(3)	6,900.	0.			GRAYKEN CENTER
THE MOUNTAIN SCHOOL AT WINHALL 9 SCHOOL ROAD WINHALL, VT 05340	52-2117220	501(C)(3)	6,600.	0.			THE FULL STORY COLLABORATION WITH MSW
WRITEBOSTON 2300 WASHINGTON STREET, 6TH FLOOR ROXBURY, MA 02119	46-1255108	501(C)(3)	6,500.	0.			PROS&CONVERSATION
DANA FARBER CANCER INSTITUTE  10 BROOKLINE PL WEST 6TH FL  BROOKLINE, MA 02445	04-2263040	501(C)(3)	6,000.	0.			JIMMY FUND WALK MATCH SUPPORTING PEDIATRIC BRAIN TUMOR RESEARCH AND CARE FOR DIFFUSE
JUMPSTART 308 CONGRESS STREET SIXTH FLOOR BOSTON, MA 02210	04-3262046	501(C)(3)	6,000.	0.			SUPPORTING EARLY LEARNIN
NEW HOPE INITIATIVE, INC. P.O. BOX 5071 KINGWOOD, TX 77325	27-3984784	501(C)(3)	6,000.	0.			SIERRA LEONE EDUCATION PROJECTS
SCHOTT FOUNDATION FOR PUBLIC EDUCATION - ONE MIFFLIN PLACE - CAMBRIDGE, MA 02138	04-3457065	501(C)(3)	6,000.	0.			THE URGENCY OF NOW VIRTUAL FUNDRAISER

. Complete if the	e organization answe	ered "Yes" on Form 9	90, Part IV, line 22.	
(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
			10	
quired in Part I, lin	e 2; Part III, column	(b); and any other ac	lditional information.	
E GRANTEE	IS REQUIF	ED TO SUBM	IT A	
TO THE F	OUNDATION.	DEPENDIN	G ON THE	
THE GRANT	EE WOULD S	SUBMIT A NA	RRATIVE AND	
RESS AND	FINAL REPO	RTS. THE	REPORTS	
IONS INCL	UDING THE	MEASURABLE	PROGRESS OF	
OF THE GR	RANT.			
	(b) Number of recipients  quired in Part I, lin  E GRANTER  TO THE F  THE GRANT  RESS AND  IONS INCI	(c) Amount of cash grant  (d) Amount of cash grant  (e) Amount of cash grant  (b) Number of recipients  (c) Amount of cash grant  (d) Amount of cash grant  (e) Amount of cash grant  (f) Amount of cash grant  (g) Amount of cash grant  (h) Amount of cash	(c) Amount of cash grant (d) Amount of non-cash assistance cash grant (a) Amount of non-cash assistance cash as cash a	E GRANTEE IS REQUIRED TO SUBMIT A  TO THE FOUNDATION. DEPENDING ON THE  THE GRANTEE WOULD SUBMIT A NARRATIVE AND  RESS AND FINAL REPORTS. THE REPORTS  IONS INCLUDING THE MEASURABLE PROGRESS OF

NAME OF ORGANIZATION OR GOVERNMENT: SOUTH SHORE STARS, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: ADVANCING EQUITABLE EDUCATION FOR BIPOC STUDENTS BY REDUCING SYSTEMIC BARRIERS TO ACADEMIC ACCESS AND

OPPORTUNITIES

NAME OF ORGANIZATION OR GOVERNMENT: RANDOLPH PUBLIC SCHOOLS

(H) PURPOSE OF GRANT OR ASSISTANCE: ADVANCING EQUITABLE EDUCATION FOR

BIPOC STUDENTS BY REDUCING SYSTEMIC BARRIERS TO ACADEMIC ACCESS AND

OPPORTUNITIES

NAME OF ORGANIZATION OR GOVERNMENT:

COALITION FOR A MULTILINGUAL RHODE ISLAND (OLNEYVILLE NEIGHBORHOOD ASSOCIATI

(H) PURPOSE OF GRANT OR ASSISTANCE: COALITION FOR A MULTILINGUAL RHODE

ISLAND CAPACITY BUILDING: STRATEGIC PLANNING PROPOSAL

NAME OF ORGANIZATION OR GOVERNMENT: URBAN COMMUNITY ALLIANCE

(H) PURPOSE OF GRANT OR ASSISTANCE: STRENGTHENING UCA'S BOARD OF

DIRECTORS, EXECUTIVE TEAM, AND PROGRAM STAFF VIA THE STRATEGIC PLAN

INITIATIVES.

NAME OF ORGANIZATION OR GOVERNMENT:

GREATEST MINDS (TALENTED AND GIFTED ASSOCIATION)

(H) PURPOSE OF GRANT OR ASSISTANCE: GENERATIONS- AN EXPLORATION OF BLACK

EDUCATION EXPERIENCES IN BOSTON-A MULTIGENERATIONAL CONFERENCE FOR BLACK

BOSTONIANS

NAME OF ORGANIZATION OR GOVERNMENT: CATHOLIC SCHOOLS FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: BUILDING MINDS SCHOLARSHIP FUND

## SCHEDULE J (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

2022

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

Go to www.irs.gov/Form990 for instructions and the latest information.

NELLIE MAE EDUCATION FOUNDATION, INC.

Employer identification number 04-2755323

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		<u> </u>
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee			
	X Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:		37	
a	Receive a severance payment or change-of-control payment?	4a	X	7
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	0   11   504/ 1/01   504/ 1/01   1504/ 1/001   1   1   1   1   5   0			
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
_	contingent on the revenues of:	Ea		х
	The organization?	<u>5a</u> 5b		X
D	Any related organization?  If "Yes" on line 5a or 5b, describe in Part III.	SD		
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
U	contingent on the net earnings of:			
a	The organization?	6a		х
		6b		X
	Any related organization?  If "Yes" on line 6a or 6b, describe in Part III.	- OD		
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
•	not described on lines 5 and 6? If "Yes," describe in Part III	7		х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
-	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W	I-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
(1) NICHOLAS C. DONOHUE	(i)	0.	0.	530,748.	0.	25,429.	556,177.	0.	
FORMER PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) GISLAINE NGOUNOU	(i)	466,494.	0.	0.	47,203.	10,673.	524,370.	0.	
INTERIM PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) MICHAEL CAREY	(i)	306,698.	0.	0.	46,836.	20,360.	373,894.	0.	
VP FOR FINANCE & ADMIN, TREASURER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(4) JESSICA SPOHN	(i)	227,911.	0.	0.	36,009.	20,360.	284,280.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
(5) DELIA ARELLANO-WEDDLETON	(i)	203,378.	0.	0.	31,602.	20,360.	255,340.	0.	
DIR. OF ENGAGEMENT & PARTNERSHIPS	(ii)	0.	0.	0.	0.	0.	0.	0.	
(6) NINA CULBERSTON	(i)	156,139.	0.	0.	22,842.	27,926.	206,907.	0.	
PROGRAM DIR, LEARNING/RESEARCH/EVAL	(ii)	0.	0.	0.	0.	0.	0.	0.	
(7) MARCOS POPOVICH	(i)	149,376.	0.	0.	21,502.	27,863.	198,741.	0.	
PROGRAM DIRECTOR, GRANTMAKING	(ii)	0.	0.	0.	0.	0.	0.	0.	
(8) PAUL MARSH	(i)	158,585.	0.	0.	22,752.	10,464.	191,801.	0.	
IT MANAGER	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
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	(ii)								
	(i)								
	(ii)	_							
	(i)								
	(ii)								

Tart in Supplemental information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 4A:
THE EXECUTIVE COMMITTEE RECOMMENDED AND THE BOARD APPROVED SEVERANCE
COMPENSATION FOR NICHOLAS DONAHUE, BASED UPON A LONGSTANDING CONTRACTUAL
EMPLOYMENT AGREEMENT WITH THE FOUNDATION. THE COMPENSATION WAS GRANTED IN
CONNECTION WITH THE TERMINATION OF HIS EMPLOYMENT EFFECTIVE AS OF MAY 31,
2021. DURING 2022, \$530,748 WAS PAID IN CONNECTION WITH THIS ARRANGEMENT.
THE PAYMENT OF \$530,748 IS REPORTED ON SCHEDULE J, PART II, COLUMN B(III).
FINAL PAYMENTS IN THE AMOUNT OF \$143,576 WILL BE PAID IN 2023. THE BOARD
OBTAINED AND RELIED UPON "APPROPRIATE DATA AS TO COMPARABILITY" IN MAKING
ITS DETERMINATION THAT TOTAL COMPENSATION WAS REASONABLE.

## SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

2022 Open to Public Inspection

OMB No. 1545-0047

Name of the organization

NELLIE MAE EDUCATION FOUNDATION, INC.

Employer identification number 04-2755323

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

ADVANCE EXCELLENT, STUDENT-CENTERED PUBLIC EDUCATION FOR ALL NEW

ENGLAND YOUTH.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
NOT-FOR-PROFIT CORPORATION TO SUPPORT EDUCATIONAL ORGANIZATIONS.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: SUPPORTING EDUCATIONAL ORGANIZATIONS LED BY PEOPLE OF COLOR:

ORGANIZATIONS LED BY PEOPLE OF COLOR ARE IN THE BEST POSITION TO ORGANIZE AND LIFT UP THE INVALUABLE VOICES OF STUDENTS AND FAMILIES WHO HAVE BEEN TRADITIONALLY EXCLUDED FROM DECISIONS MADE ABOUT THEIR SCHOOLS. THESE ORGANIZATIONS ARE ADVOCATING FOR RACIAL EQUITY IN NEW SUCH AS: IMPLEMENTING CULTURALY RESPONSIVE TEACHING ENGLAND SCHOOLS, AND LEARNING, DIVERSIFYING THE TEACHER WORKFORCE, ESTABLISHING RESTORATIVE JUSTICE PRACTICES IN SCHOOLS, AND SERVING THE WHOLE CHILD AND FAMILY. BY PROVIDING MULTI-YEAR, GENERAL OPERATING SUPPORT TO ORGANIZATIONS LED BY AND SERVING PEOPLE OF COLOR, FOCUSED ON ADDRESSING INEQUITIES IN EDUCATION, WE BELIEVE WE WILL SUPPORT THE INCREASED FINANCIAL FREEDOM AND ORGANIZATIONAL STABILITY NEEDED TO ADVANCE THEIR MISSIONS OVER THE LONG TERM, IN TURN SUPPORTING YOUNG PEOPLE TO PARTICIPATE IN MORE RACIALLY JUST PUBLIC EDUCATION SYSTEMS. THE FOUNDATION DISTRIBUTED \$4.7 MILLION TO EDUCATIONAL ORGANIZATIONS LED BY PEOPLE OF COLOR.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

<u>Schedule O (Form 990) 2022</u> Page **2** 

Name of the organization

NELLIE MAE EDUCATION FOUNDATION, INC.

Employer identification number 04-2755323

AMPLYFYING YOUTH VOICE & LEADERSHIP EDUCATIONAL ORGANIZATIONS:

YOUTH - PARTICULARLY YOUTH OF COLOR - DIRECTLY EXPERIENCE EDUCATIONAL INEQUITIES, BUT THEIR INPUT IS USUALLY LEFT OUT OF DISCUSSIONS AROUND SOLVING THOSE PROBLEMS. YOUTH NEED SPACE TO ARTICULATE THEIR IDEAS, CONCERNS AND EXPERIENCES, AND SUPPORT TO BUILD THE SKILLS AND CAPACITY TO ARTICULATE, ADVOCATE FOR, AND EFFECT THE CHANGES THEY SEEK IN EDUCATION. YOUTH ORGANIZING CAN ACHIEVE INCREASED IMPACT BY PURSUING SIMILAR GOALS IN COLLOBORATION WITH EACH OTHER. BUT WITHOUT DEDICATED FUNDING, IT CAN BE DIFFICULT FOR YOUTH ORGANIZING GROUPS TO FIND SUFFICIENT RESOURCES TO SHARE BEST PRACTICES AND BUILD CAPACITY. WHEN YOUNG PEOPLE CAN WORK COLLECTIVELY, THEY CAN BUILD POWER, AND INCREASE MOMENTUM AND MOVEMENT TOWARDS SHARED ACTION. THEREFORE, THE FOUNDATION SUPPORTS CAPACITY OF INDIVIDUAL YOUTH ORGANIZING GROUPS WHILE SUPPORTING THEIR COLLABORATION THROUGH A NEW ENGLAND WIDE NETWORK. AS A RESULT, MEMBER ORGANIZATIONS WILL BECOME MORE EFFECTIVE AT PURSUING THEIR AGENDAS AND MOVE TOWARDS MORE COLLABORATIVE AND ALIGNED WORK, INCREASING AND STRENGTHENING THE POWER OF YOUTH VOICE IN THE REGION THE FOUNDATION DISTRIBUTED \$3.2 MILLION TO SEVERAL OVERALL. EDUCATIONAL ORGANIZATIONS TO AMPLIFY YOUTH VOICE AND BECOME PART OF THE DECISIONS THAT AFFECT THEIR FUTURE.

ADVANCING EDUCATIONAL COMMUNITY-SCHOOL PARTNERSHIPS:

WHEN SCHOOLS WORK IN PARTNERSHIPS WITH COMMUNITY-BASED ORGANIZATIONS,

STUDENTS ARE BETTER POSITIONED TO RECEIVE THE COMMUNITY SUPPORTS THEY

NEED TO THRIVE. WE KNOW WHEN COMMUNITY MEMBERS ARE WELCOMED INTO THE

SCHOOL ENVIRONMENT AND PLAY A KEY ROLE IN DECISION MAKING, ALL YOUNG

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Name of the organization **Employer identification number** 04-2755323 NELLIE MAE EDUCATION FOUNDATION, INC. PEOPLE BENEFIT. ROBUST COMMUNITY-SCHOOL PARTNERSHIPS ARE ESSENTIAL TO FOSTERING RELATIONSHIPS OF TRUST AND RESPECT, AND BUILDING THE CAPACITY OF ALL STAKEHOLDERS INSIDE AND OUTSIDE OF THE SCHOOL BUILDING. SUCH PARTNERSHIPS CAN HELP FACILITATE INCLUSIVE DECISION-MAKING PROCESSES, AND LEVERAGE LOCAL RESOURCES AND EXPERTISE TO ADDRESS EDUCATIONAL INEQUITIES. THE ULTIMATE PURPOSE OF THIS GRANT FUND IS TO SUPPORT COMMUNITY-DRIVEN PARTNERSHIPS BETWEEN DISTRICTS AND THEIR COMMUNITIES TO ADVANCE RACIAL EQUITY AND EXCELLENT, STUDENT-CENTERED PUBLIC EDUCATION. THE FOUNDATION DISTRIBUTED \$3.8 MILLION TO SEVERAL EDUCATIONAL ORGANIZATIONS TO BEGIN PARTNERHIPS EFFORTS.

STRENGTHENING EDUCATIONAL PARTNERSHIPS AND MOVEMENT BUILDING:

WHEN ORGANIZATIONS COME TOGETHER AND ARE ABLE TO SHARE KNOWLEDGE, RESOURCES, AND GOALS, THEY ARE BETTER EQUIPPED TO ACHIEVE LASTING CHANGE. WE UNDERSTAND THAT MANY OF THE RACIAL EQUITY BARRIERS THAT EXIST IN OUR EDUCATION SYSTEM ARE IN PART SHAPED BY INEOUITABLE POLICIES, PAST AND PRESENT. WE SUPPORT EXISTING AND EMERGING EDUCATIONAL PARTNERSHIPS, MOVEMENTS, AND COALITIONS THAT ARE LOOKING TO IDENTIFY AND DISMANTLE STATE AND FEDERAL POLICY BARRIES TO ADVANCING RACIAL EQUITY IN PUBLIC EDUCATION. ADDITIONALLY, WE BELIEVE THAT IF WE SUPPORT OUR GRANTEES TO BUILD RELATIONSHIPS WITH EACH OTHER, WHILE SIMULTANEOUSLY BUILDING AND CONNECTING WITH STATE AND NATIONAL COALITIONS, THEN ORGANIZATIONS WILL FIND OPPORTUNITIES TO ALIGN THEIR WORK AND ADVANCE A SHARED VISION FOR EQUITY ON MULTIPLE LEVELS. OUR STRENGTHENING PARTNERSHIPS AND MOVEMENT BUILDING FUND IS COMPRISED OF THREE SUB-FUNDS: 1). ADVOCACY 2). COALITIONS AND 3). PARTNERSHIPS. THE FOUNDATION DISTRIBUTED \$3.0 MILLION TO BUILD STATE AND NATIONAL

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Name of the organization

NELLIE MAE EDUCATION FOUNDATION, INC.

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EDUCATIONAL PARTNERSHIPS, COALITIONS, AND MOVEMENT BUILDING.

THE FOUNDATION DISTRIBUTED \$3.1 MILLION TO EDUCATIONAL ORGANIZATIONS
SUPPORTING WORK BOTH INSIDE AND OUTSIDE OF THE FOUR CORE FUNDS.

FORM 990, PART VI, SECTION B, LINE 11B:

REVIEW OF FORM 990 - MANAGEMENT OF THE FOUNDATION PLAYED AN ACTIVE AND KEY

ROLE IN THE PREPARATION AND REVIEW OF FORM 990. MANAGEMENT DRAFTED THE FORM

990 AND FORWARDED TO THE FOUNDATION'S INDEPENDENT CPA FIRM, WHICH REVIEWED

THE FILING FOR COMPLETENESS, ACCURACY, AND FINALIZATION BEFORE FILING. THE

FORM 990 WAS REVIEWED AND APPROVED BY THE AUDIT COMMITTEE AND WAS PROVIDED

TO THE FULL BOARD BEFORE IT WAS FILED.

FORM 990, PART VI, SECTION B, LINE 12C:

THE FOUNDATION'S CONFLICT OF INTEREST POLICY REQUIRES AN ANNUAL CONFLICT OF
INTEREST DISCLOSURE FORM FROM BOARD AND STAFF MEMBERS REGARDING OUTSIDE

AFFILIATIONS AS A DIRECTOR, TRUSTEE OR OFFICER. THE POLICY REQUIRES

DISCLOSURE OF ANY TRANSACTIONS, FINANCIAL ARRANGEMENT OR BUSINESS

RELATIONSHIP EACH BOARD MEMBER, STAFF MEMBER AND OR FAMILY MEMBER MAY HAVE

WITH THE FOUNDATION. UPON SUBMISSION OF THE CONFLICT DISCLOSURE FORM, A

LISTING OF EACH BOARD AND STAFF MEMBER IS COMPILED ALONG WITH AFFILIATIONS.

THE LIST IS MONITORED DURING THE YEAR FOR ANY UPDATES. BOARD MEMBERS ARE

REQUIRED TO RECUSE THEMSELVES FROM VOTING ON TRANSACTIONS IN WHICH THE

INDIVIDUAL OR A MEMBER OF HIS OR HER IMMEDIATE FAMILY OR AN AFFILIATED

ENTITY OF ANY SUCH PERSON HAS A FINANCIAL INTEREST. STAFF MEMBERS ARE

REQUIRED TO RECUSE THEMSELVES FROM THE GRANT MAKING PROCESS IF ANY SUCH

AFFILIATION EXISTS. ANY POTENTIAL CONFLICTS ARE DETERMINED BY THE BOARD

WHICH WILL IMPOSE RESTRICTIONS UPON AFFECTED PARTIES ACCORDINGLY.

Schedule O (Form 990) 2022 Page 2 Name of the organization **Employer identification number** 04-2755323 NELLIE MAE EDUCATION FOUNDATION, INC. FORM 990, PART VI, SECTION B, LINE 15: THE EXECUTIVE FINANCE COMMITTEE OF THE BOARD OF DIRECTORS CONSIDERS COMPARABILITY DATA, PROVIDED BY AN INDEPENDENT CONSULTANT, WHEN DETERMINING COMPENSATION FOR ALL STAFF MEMBERS AND THE BOARD OF DIRECTORS. DOCUMENTATION INCLUDING THE RELIED UPON COMPARABILITY DATA, DELIBERATION PROCESS, AND DECISIONS ARE INCLUDED IN BOARD MATERIALS AND ARE RECORDED IN COMMITTEE AND BOARD MINUTES. IN ALL CASES, COMPENSATION IS DETERMINED BY INDEPENDENT PERSONS. THIS PROCESS WAS MOST RECENTLY UNDERTAKEN IN 2022. FORM 990, PART VI, SECTION C, LINE 19: MANAGEMENT WILL PROVIDE UPON REQUEST GOVERNING DOCUMENTS AND THE CONFLICT OF INTEREST POLICY TO THE PUBLIC. CURRENTLY THE FOUNDATION'S AUDITED FINANCIAL STATEMENTS AND TAX RETURNS APPEAR ON THE ORGANIZATION'S WEBSITE AND ARE ALSO AVAILABLE UPON REQUEST.