# Form **990**

## **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

2024

Open to Public Inspection

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

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.

Α	For the	e 2024 ca	lendar year, or tax year beginning		, and ei	nding	-	
В	Check if a	applicable:	C Name of organization 222 FOUND	ATION		D Employe	er identificatior	number
	Address	change	Doing business as					
$\Box$			Number and street (or P.O. box if mail is no	t delivered to street address)	Room/suite	82-482376	33	
Ш	Name ch	ange	122 N Wheaton Ave		412	<b>E</b> Telepho	ne number	
	Initial retu	urn	City or town	State	ZIP code	224-655-1	000	
一	Circul and an	/t	Wheaton	IL	60187		900	
Ш	Finai return	n/terminated	Foreign country name Foreign	n province/state/county	Foreign postal	code		
	Amended	d return				G Gross re	ceipts \$	957,806
П	Annliaatia	on pending	F Name and address of principal officer:			H(a) le this e group retur	a for aubordinates?	Yes X No
Ш	Application	on pending	' '	TE 440 \\/\	0407	H(a) Is this a group return		
			Bob Seiffert 122 N. Wheaton Ave, S	TE 412, Wheaton, IL of	0107	H(b) Are all subordina	•	Yes No
1	Tax-exe	mpt status:	X 501(c)(3) 501(c) (	(insert no.) 4947(a)(1	I) or 527	If "No," attach a	list. See instruct	ions
J	Website	: WV	VW.222FOUNDATION.ORG			H(c) Group exemption	n number	
<u> </u>					1. 1/			flamel densialler 11
		organization		iation Other	L Yea	r of formation: 2018	3 MI State of	f legal domicile:
	art I		mmary					
	1		lescribe the organization's mission or		es:			
Ф			2 FOUNDATION IS A 501(C)3 PUBL					
ũ		CHARIT	TY THAT WAS FOUNDED TO INVES	ST IN THE FUTURE CH	RISTIAN	/)		
r.								
Activities & Governance	2	Check th	his box if the organization dis	scontinued its operations	s or disposed	of more than 25%	of its net as	ssets.
ဖိ	3		of voting members of the governing				3	10
త	4		of independent voting members of the				4	10
<u>:i</u>	5		imber of individuals employed in cale				5	4
₹	6		imber of volunteers (estimate if neces				6	61
Αct	7a		related business revenue from Part				7a	0
•	b		elated business taxable income from				7b	
	† ~	TTO CUITO	siated bacillees taxable illeelile ilelil	Torri occ 1,1 dreit, into		Prior Year	1.2	Current Year
-	8	Contribu	utions and grants (Part VIII, line 1h) .				76,482	697,797
Revenue	9		n service revenue (Part VIII, line 2g) .			•	0	0
Ve.	10		ent income (Part VIII, column (A), line				32,636	23,202
Re	11		evenue (Part VIII, column (A), lines 5				20,275	0
	12		venue—add lines 8 through 11 (must eq				38,843	720,999
	13		and similar amounts paid (Part IX, co				03,707	229,566
	14		s paid to or for members (Part IX, cold				0	0
	15		, other compensation, employee benefit			3/	39,066	293,347
Expenses	16a		ional fundraising fees (Part IX, colum			- 00	0	230,047
eus	b		ndraising expenses (Part IX, column		153,769			0
o X	17		xpenses (Part IX, column (A), lines 1			17	78,817	159,147
ш	18		spenses (Fart IX, column (A), lines in spenses. Add lines 13–17 (must equa				71,590	682,060
	19		e less expenses. Subtract line 18 from				32,747	38,939
<u> </u>		Kevenu	e less expenses. Subtract line 10 110	11 111116 12		Beginning of Currer		End of Year
Net Assets or	20	Total ac	ssets (Part X, line 16)				52,478	413,873
Asse	21					J.	2,053	21,628
et/	22		ets or fund balances. Subtract line 21			31	50,425	392,245
				110111111111111111111111111111111111111		<u></u>	50,425	392,243
	art II		nature Block y, I declare that I have examined this return, inc	luding accompanying achadula	a and atatamenta	and to the heat of my	knowlodgo	
			ect, and complete. Declaration of preparer (other			•	•	
			(,					
Si	gn	Cian	ature of officer			Data		
He	re				TDE	Date		
			o Seiffert		IRE	ASURER		
			e or print name and title	Duamanania sia		Dete		T DTIN
ь.	: al	Prep	parer's name	Preparer's signature		Date	Check if	PTIN
Pa		Che	eryden Juergensen	Cheryden Juerge	ensen	5/12/2025	self-employed	P01252676
	eparer			1			36-361499	
Us	e Only	y		- 000 M-II II 000		Firm's EIN		
			n's address 5400 W. Elm Street, Suit			Phone no.	(815) 344-	
Ма	y the IF	RS discus	ss this return with the preparer shown	above? See instruction	s			X Yes No

						•
	90 (2024 <u>)</u> rt III	222 FOUNDATION Statement of Program Service Accomp	lichmonte	8.	2-4823763	Page <b>2</b>
ıa		Check if Schedule O contains a response		this Part III......		
1	THE 22 CHRIS TO IN\	describe the organization's mission: 22 FOUNDATION IS A 501(C)3 PUBLIC CHARITY TIAN MINISTRY LEADERS OF THE WORLD. IN A EST IN EACH OF OUR STUDENT PARTNERS IN TH, AND MINISTRY DEVELOPMENT.	ADDITION TO FINANCIA	L ASSISTANCE, OUR GOA	L IS	
2	Did the	organization undertake any significant program se or Form 990 or 990-EZ?		ich were not listed on	. Yes	X No
4	service If "Yes Describ	organization cease conducting, or make significants?	ents for each of its three	largest program services, as		X No
	the tota	ll expenses, and revenue, if any, for each program	service reported.			
4a		) (Expenses \$ 477,476 22 FOUNDATION PARTNERS WITH SEMINARY S		234,316 ) (Revenue \$ DES FINANCIAL AND SPIR		) RT.
4b	(Code:	) (Expenses \$	including grants of \$	) (Revenue \$		)
	(Cada)			V/Davania 6		
4c	(Code:	) (Expenses \$	including grants of \$	) (Revenue \$		)

0)(Revenue \$

(Expenses \$ 0 including grants of \$

4e Total program service expenses 477,476

Other program services (Describe on Schedule O.)

0)

Part IV

**Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 2 Χ 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 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. . . Χ 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 6 Χ 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. . . . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 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 9 Χ Did the organization, directly or through a related organization, hold assets in donor-restricted endowments 10 10 Χ 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. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete 11a Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more c Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. . . 11e 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 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional . . . . . . 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E. . . . . . . . . . . . . 13 13 Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV. . . . . . . . . . . . . . . . 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or 15 15 Χ Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services 17 17 Χ 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 20a **20a** Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H* . . . . . . . . . . . . **b** If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . . . . . . 20b 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 . . . . . .

Part	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Χ
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	١.,		
	to defease any tax-exempt bonds?	24c		-
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
<b>25</b> a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	250		V
h	transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		Х
D	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		<del>  ^</del>
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			Ť
	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	27		Х
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule			
	L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Χ
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Χ
С	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		Х
29	Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes,"			.,
00	complete Schedule N, Part II	32		Х
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	22		_
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,	33		Х
34	III, or IV, and Part V, line 1	34		Х
352	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> </u>
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled	ooa		
~	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
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		Х
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		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
	19? <b>Note:</b> All Form 990 filers are required to complete Schedule O	38	Х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			Ш
			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			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	Χ	

82-4823763 Page **5** 

	(2024)

222 FOUNDATION

	7 === 1 0 0.12 1.11 0.11	0.00		9
Part	Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Χ	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Χ
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Χ
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).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Χ
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Χ
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
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		Х
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		Χ
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	l _		.,
	required to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			.,
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Χ
g	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			
^	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	0-		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b		
b 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	90		
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
a	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
b 11	Section 501(c)(12) organizations. Enter:	-		
	Gross income from members or shareholders			
a b	Gross income from other sources (Do not net amounts due or paid to other sources	-		
b	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		
b	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		
	Note: 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		Х
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			
	excess parachute payment(s) during the year?	15		Χ
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
. •	If "Yes," complete Form 4720, Schedule O.			
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.			

Form 990 (2024) 222 FOUNDATION 82-4823763 Page **6** 

Part VI Go

1a b 2 3 4 5	Enter the number of voting members of the governing body at the end of the tax year		Yes	No
b 2 3	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 O.  Enter the number of voting members included on line 1a, above, who are independent			
3	if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.  Enter the number of voting members included on line 1a, above, who are independent			
3	committee, explain on Schedule O.  Enter the number of voting members included on line 1a, above, who are independent			
3	Enter the number of voting members included on line 1a, above, who are independent			
3	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?			
3	any other officer, director, trustee, or key employee?	2		
4	Did the organization delegate control over management duties customarily performed by or under the direct	2		
4			<b></b>	Х
	supervision of officers, directors, trustees, or key employees to a management company or other person?	3	<b></b>	Х
5	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	<del>                                     </del>	X
_	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	<del>                                     </del>	X
6	Did the organization have members or stockholders?	6	<b></b>	Χ
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	_		V
	one or more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			V
•	stockholders, or persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
_	the year by the following:	0.0	_	
a	The governing body?	8a 8b	X	
ь 9	Each committee with authority to act on behalf of the governing body?	OD	^	
9	at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		v
800	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue C	-	<u> </u>	Χ
Sec	tion B. Foncies (This Section B requests information about policies not required by the internal Nevertue C	Joue.	/ Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	103	Х
b	· · · · · · · · · · · · · · · · · · ·	100		
~	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a		11a	Х	
b				
12a		12a	Х	
b		12b	X	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Χ	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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?			
а	The organization's CEO, Executive Director, or top management official.	15a	Х	
b	Other officers or key employees of the organization	15b	Χ	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	, 1 1 3			
	with a taxable entity during the year?	16a		Χ
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation 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		
	tion C. Disclosure			
Sec	11 (4) (4) (4) (4) (5) (5) (6) (7) (7) (7) (7) (7) (7)			
17	List the states with which a copy of this Form 990 is required to be filedIL			
	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section	501(c)		
17	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
17 18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  X Own website X Upon request Other (explain on Schedule O)	)		
17	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  X Own website  X Another's website  X Upon request  Other (explain on Schedule O)  Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest po	)		
17 18 19	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  X Own website  X Another's website  X Upon request  Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest po and financial statements available to the public during the tax year.	)		
17 18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  X Own website  X Another's website  X Upon request  Other (explain on Schedule O)  Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest po	)		

Form 990 (2024) 222 FOUNDATION 82-4823763 Page **7** 

# 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.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

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

				•			•		*	
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unles er an	Pos neck ss pe	rson lirect	than o is both or/trusted employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) SEAN GLORE	40.00									
EXECUTIVE DIRECTOR	0.00			Х				100,000		
(2) ANTHONY TAKO	2.00									
CHAIRMAN	0.00	Х		Х						
(3) TONY CIRO	2.00									
VICE CHAIRMAN AND SECRETARY	0.00	Х		Х						
(4) JIM JODREY	2.00									
TREASURER	0.00	Х		Х						
(5) MARLEEN BARRETT	2.00									
MEMBER	0.00	Х								
(6) DANIEL NALE	1.00									
MEMBER	0.00	Х								
(7) DANA LEAHY	1.00									
MEMBER	0.00	Х								
(8) ANDREW YATES	1.00									
MEMBER	0.00	Χ								
(9) BRIAN COFFEY	1.00									
MEMBER	0.00	Х								
(10) GREG KIST	1.00									
MEMBER	0.00	Х								
(11) BOB SIEFFERT	1.00									
MEMBER	0.00	Χ								
(12)										
(13)										
(14)										

82-4823763

Pa	art VI Section A. Officers, Directors, Tru	ıstees, Key Em	ploye	es,	and	iH b	ighes	t C	ompensated Em	iployees (c	<u>ontini</u>	ued)	
					•	C) sition							
	(A)	(B)	(do not check more than of box, unless person is both						(D)	(E)			F)
	Name and title	Average hours					or/trust	tee)	Reportable compensation	Reportabl compensat	ion		d amount other
		per week (list any	Indiv or d	Insti	Officer	Key	High emp	Former	from the organization (W-2/	from relate organizations			nsation n the
		hours for related	Individual trustee or director	Institutional trustee	ĕ	Key employee	Highest cc employee	ner	1099-MISC/ 1099-NEC)	1099-MIS 1099-NEC			ation and ganizations
		organizations below	I trus	nal tro		loyee	e		,		,		<b>J</b>
		dotted line)	tee	stee		"	Highest compensated employee						
							ted						
(15)										1			
(16)										$\rightarrow$			
(10)													
(17)													
(10)													
(19)													
(20)													
(21)				4		1		,					
(22)													
(23)						Ė							
			X										
(24)													
(25)													
(23)													
1b	Subtotal			-		-			100,000		0		0
С	Total from continuation sheets to Part VII, So								0		0		0
<u>d</u>	Total (add lines 1b and 1c)							ived	100,000 more than \$100	000 of	0		0
-	reportable compensation from the organization		nou c	200 V	0, 1	*110	1000	1700	more than \$100	,,000 01			0
	-											Υ	es No
3	Did the organization list any <b>former</b> officer, dire employee on line 1a? <i>If "Yes," complete Sched</i>											3	
4	For any individual listed on line 1a, is the sum of											3	X
7	the organization and related organizations grea								•	h			
							-					4	Х
5	Did any person listed on line 1a receive or accr	•			-			_					
	for services rendered to the organization? If "Yo	es," complete So	chedu	ıle J	for	suc	ch pei	rsor	)			5	X
1	tion B. Independent Contractors  Complete this table for your five highest compe	ensated independ	dent (	cont	ract	ors	that i	rece	eived more than	\$100.000 of	 F		
	compensation from the organization. Report co											ax year	
	<b>(A)</b> Name and business add	rocc							(B) Description of ser	vices	c	(C) ompensa	tion
	ivalile aliu busilless auu	1655							Description of ser	vices		ompensa	0
													0
													0
										+			0
2	Total number of independent contractors (inclu-	ding but not limit	ted to	tho	se l	iste	d abo	ve)	who received				0
	more than \$100,000 of compensation from the	-					0						

82-4823763

#### Part VIII Statement of Revenue

		Check if Schedule O contains a response or note to any line	in this Part VIII			
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
fts, Grants . Amounts	1a b c d	Federated campaigns	0 0 0			
Contributions, Gifts, Grants and Other Similar Amounts	e f	Government grants (contributions) 1e  All other contributions, gifts, grants, and similar amounts not included above 1f 697,79	0		1	
Contrib and Ot	g h	Noncash contributions included in lines 1a–1f	697,797	<u>C</u>		
Program Service Revenue	2a b c d	- Dasiness douc	0 0 0			
Progr R	e f g	All other program service revenue	0			
	4 5	other similar amounts)	9,038 0 0			9,038
	6a b c	Gross rents 6a  Less: rental expenses . 6b  Rental income or (loss) 6c 0	0			
	d 7a	Net rental income or (loss)	0			
Revenue	b c	Less: cost or other basis and sales expenses Gain or (loss)	0			
Other	d 8a	Net gain or (loss)	14,164			14,164
	b c 9a	Net income or (loss) from fundraising events	0 0			
		Less: direct expenses	0			
sno	С	Less: cost of goods sold	0 0			
Miscellaneous Revenue	11a b c d	All other revenue	0 0			
Σ	e 12	Total Add lines 11a–11d	720 999		0	23.203

82-4823763 Page **10** 

## Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX							
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses		
1	Grants and other assistance to domestic organizations		·		·		
	and domestic governments. See Part IV, line 21	0					
2	Grants and other assistance to domestic						
	individuals. See Part IV, line 22	128,841	128,841				
3	Grants and other assistance to foreign						
	organizations, foreign governments, and foreign						
	individuals. See Part IV, lines 15 and 16	100,725	100,725				
4	Benefits paid to or for members	0	,				
5	Compensation of current officers, directors,	-					
-	trustees, and key employees	100,000	54,072	11,933	33,995		
6	Compensation not included above to disqualified	100,000	0.,012	11,000			
-	persons (as defined under section 4958(f)(1)) and						
	persons described in section 4958(c)(3)(B)	0					
7	Other salaries and wages	171,102	92,519	20,418	58,165		
8	Pension plan accruals and contributions (include	17 1,102	02,010	20,110	00,100		
Ū	section 401(k) and 403(b) employer contributions)	0					
9	Other employee benefits	8.134	4,398	971	2,765		
10	Payroll taxes	14,111	7,630	1.684	4,797		
11	Fees for services (nonemployees):	14,111	7,030	1,004	4,131		
		0					
a	Management	236	165	59	12		
b	Legal				12		
C	Accounting	18,080	12,656	4,520	904		
d	Lobbying	0					
e	Professional fundraising services. See Part IV, line 17			0.47			
f	Investment management fees	947		947			
g	Other. (If line 11g amount exceeds 10% of line 25, column						
40	(A), amount, list line 11g expenses on Schedule O.)	0	7.007	4.057	0.704		
12	Advertising and promotion	19,568	7,827	1,957	9,784		
13	Office expenses	2,078	1,453	521	104		
14	Information technology	1,619	1,133	405	81		
15	Royalties	0					
16	Occupancy	10,816	7,571	2,704	541		
17	Travel	14,560	7,644	364	6,552		
18	Payments of travel or entertainment expenses						
	for any federal, state, or local public officials	0					
19	Conferences, conventions, and meetings	0					
20	Interest	0					
21	Payments to affiliates	0					
22	Depreciation, depletion, and amortization	0	0	0	0		
23	Insurance	5,187	3,631	1,297	259		
24	Other expenses. Itemize expenses not covered						
	above. (List miscellaneous expenses on line 24e. If						
	line 24e amount exceeds 10% of line 25, column						
	(A), amount, list line 24e expenses on Schedule O.)						
а	Contract Employees	63,061	31,531		31,530		
b	Food, Beverage, Venue, Entertainment	7,220	3,904	862	2,454		
С	Bank and Payroll	5,884	4,119	1,471	294		
d	Student Bevevolence	4,750	4,750	0	0		
е	All other expenses	5,141	2,907	702	1,532		
25	Total functional expenses. Add lines 1 through 24e	682,060	477,476	50,815	153,769		
26	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 (2024) 222 FOUNDATION 82-4823763 Page **11** 

# Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X.	(A)		(B)
			Beginning of year	_	End of year
	1	Cash—non-interest-bearing	97,640	1	192,987
	2	Savings and temporary cash investments	0	2	
	3	Pledges and grants receivable, net	0	3	28,080
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	0	5	
	6	Loans and other receivables from other disqualified persons (as defined			
<b>(</b> 0		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	6	
Assets	7	Notes and loans receivable, net	0	7	0
Ass	8	Inventories for sale or use	0	8	
	9	Prepaid expenses and deferred charges	0	9	
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 0			
	b	Less: accumulated depreciation	0	10c	0
	11	Investments—publicly traded securities	0	11	0
	12	Investments—other securities. See Part IV, line 11	254,838	12	179,962
	13	Investments—program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	12,844
	16	Total assets. Add lines 1 through 15 (must equal line 33)	352,478	16	413,873
	17	Accounts payable and accrued expenses	2,053	17	9,138
	18	Grants payable	0	18	
	19	Deferred revenue	0	19	
	20	Tax-exempt bond liabilities	0	20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	
Liabilities	22	Loans and other payables to any current or former officer, director,			
Ħ		trustee, key employee, creator or founder, substantial contributor, or 35%			
jak		controlled entity or family member of any of these persons	0	22	
_	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17–24). Complete			
		Part X of Schedule D	0	25	12,490
	26	Total liabilities. Add lines 17 through 25	2,053	26	21,628
es		Organizations that follow FASB ASC 958, check here X			
anc.		and complete lines 27, 28, 32, and 33.			
3ali	27	Net assets without donor restrictions	347,625	27	359,445
В	28	Net assets with donor restrictions	2,800	28	32,800
E		Organizations that do not follow FASB ASC 958, check here			
Net Assets or Fund Balances		and complete lines 29 through 33.			
o S	29	Capital stock or trust principal, or current funds	0	29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund	0	30	
As	31	Retained earnings, endowment, accumulated income, or other funds	0	31	
et,	32	Total net assets or fund balances	350,425	32	392,245
Z	33	Total liabilities and net assets/fund balances	352,478	33	413,873

Form 990 (2024) 222 FOUNDATION 82-4823763 Page **12** 

Part	XI Reconciliation of Net Assets				*
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		72	0,999
2	Total expenses (must equal Part IX, column (A), line 25)	2		68	2,060
3	Revenue less expenses. Subtract line 2 from line 1	3		3	8,939
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		35	0,425
5	Net unrealized gains (losses) on investments	5			2,881
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			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
		10		39	2,245
Part					
	Check if Schedule O contains a response or note to any line in this Part XII				Ш
				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 O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. <u>2</u> a		X
	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 basis, 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?		. 20	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O.				
3a	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		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why on Schedule Q and describe any steps taken to undergo such audits		3h	.	

Form **990** (2024)

#### **SCHEDULE A** (Form 990)

## **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.

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Employer identification number

		JNDATION						23/63	
Par		Reason for Public Char							
	orga	anization is not a private foundat	•				•		
1	Н	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).							
2	Щ	A school described in <b>section</b> 1		·					
3	Щ	A hospital or a cooperative hos			-				
4	Ш	A medical research organizatio hospital's name, city, and state	· · ·	nction with a hospital d	escribed i	n <b>section</b>	170(b)(1)(A)(iii). En	ter the	
5		An organization operated for th section 170(b)(1)(A)(iv). (Com		e or university owned	or operate	ed by a go	vernmental unit desc	cribed in	
6		A federal, state, or local govern	ment or governmen	ital unit described in <b>se</b>	ection 170	(b)(1)(A)(	v).		
7		An organization that normally redescribed in <b>section 170(b)(1)</b>			m a govei	rnmental u	unit or from the gene	ral public	
8		A community trust described in	section 170(b)(1)(A	A)(vi). (Complete Part	II.)				
9		An agricultural research organi: or university or a non-land-gran university:							
10	Χ		o its exempt functio income and unrelate	ns, subject to certain e ed business taxable in	exceptions come (les	; and (2) r s section t	no more than 33 1/39 511 tax) from busine	% of its	
11		An organization organized and	operated exclusivel	y to test for public safe	ty. See <b>se</b>	ection 509	)(a)(4).		
12		An organization organized and one or more publicly supported Check the box on lines 12a thro	organizations desc	ribed in section 509(a	)(1) or sec	ction 509(	a)(2). See section 5	09(a)(3).	
a		Type I. A supporting organization(sorganization. You must con	s) the power to regunder to regunder to regular to the power to regular to regular to the power	larly appoint or elect a tions A and B.	majority o	of the direc	ctors or trustees of th	e supporting	
b	ļ	Type II. A supporting organization(s). You must c	e supporting organi	zation vested in the sa					
С		Type III functionally integra						rated with,	
d		its supported organization(s)  Type III non-functionally in		•	-		•	anization(s)	
u	ļ	that is not functionally integr requirement (see instruction	ated. The organizat	ion generally must sati	sfy a distr	ibution red	quirement and an att		
е		Check this box if the organiz	ation received a wr	itten determination fror	n the IRS	that it is a		e III	
		functionally integrated, or Ty						_	ر م
f		Enter the number of supported Provide the following information	-						0
g		Name of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the o	rganization	(v) Amount of monetary	(vi) Amour	nt of
				(described on lines 1–10 above (see instructions))	listed in you docur	r governing ment?	support (see instructions)	other suppor instruction	
					Yes	No			
(A)									
(B)									
(C)									
(D)									
(E)									
Tota									

Schedule A (Form 990) 2024 222 FOUNDATION 82-4823763 Page 2 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.) Section A. Public Support (a) 2020 **(b)** 2021 (d) 2023 (e) 2024 Calendar year (or fiscal year beginning in) (c) 2022 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . . . 0 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . . . 0 **Total.** Add lines 1 through 3 . . . . . . 0 0 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. Subtract line 5 from line 4 Section B. Total Support (e) 2024 (a) 2020 (b) 2021 (c) 2022 (d) 2023 Calendar year (or fiscal year beginning in) (f) Total 0 0 0 0 Amounts from line 4 . . . . . . . . . 0 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . . . . . . . . . . Net income from unrelated business activities, whether or not the business is regularly carried on . . . . . . . . . . 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . . . . . . 11 Total support. Add lines 7 through 10 . . . 12 12 Gross receipts from related activities, etc. (see instructions). 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f)) . . . . . . . . . . . . . . . . . 0.00% 14 15 16a 33 1/3% support test—2024. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

# Gross receipts from related activities, etc. (see instructions). 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage 14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f)). 15 Public support percentage from 2023 Schedule A, Part II, line 14. 15 0.00% 16a 33 1/3% support test—2024. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. 15 33 1/3% support test—2023. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. 16 30 1/3% support test—2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization. 16 10%-facts-and-circumstances test—2023. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization. 18 Private foundation. If the organization did not check a box on line 13, 16a

Schedule A (Form 990) 2024 222 FOUNDATION 82-4823763 Page **3** 

#### 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.)

_	ir tiro organization rano to qu	any ander the	tooto notoa por	ov, piedee een	ipioto i dit ii.)		
	ction A. Public Support	(-) 0000	(1-) 0004	(-) 0000	(-1) 0000	(-) 0004	/6 T-+-1
	ndar year (or fiscal year beginning in)	(a) 2020	<b>(b)</b> 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	348,424	367,793	498,041	476,482	697,797	2,388,537
2	Gross receipts from admissions, merchandise	340,424	307,793	490,041	470,402	091,191	2,300,337
	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						
7	organization'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	348,424	367,793	498,041	476,482	697,797	2,388,537
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons	73,422	72,887	66,581	114,563	141,856	469,309
b	Amounts included on lines 2 and 3				רע		
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						(
С	Add lines 7a and 7b	73,422	72,887	66,581	114,563	141,856	469,309
8	Public support (Subtract line 7c from						
0	line 6.)			*			1,919,228
	ction B. Total Support	(a) 2020	<b>(b)</b> 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9	ndar year (or fiscal year beginning in) Amounts from line 6	348,424	367,793	498,041	` '	697,797	<b>(f)</b> Total 2,388,537
-	Gross income from interest, dividends,	340,424	301,193	490,041	470,402	097,797	2,300,337
IVa	payments received on securities loans, rents,	•					
	royalties, and income from similar sources	20,486	63,927	25,003	32,636	23,202	165,254
b	Unrelated business taxable income (less	20,100	00,021	20,000	02,000	20,202	100,20
~	section 511 taxes) from businesses		·				
	acquired after June 30, 1975						(
С	Add lines 10a and 10b	20,486	63,927	25,003	32,636	23,202	165,254
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on .						(
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						(
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	368,910		523,044			2,553,791
14	First 5 years. If the Form 990 is for the orga	· · · · · · · · · · · · · · · · · · ·		•	` ', ' '		
<u> </u>	organization, check this box and stop here						· · · · · <u>L</u>
	ction C. Computation of Public Su			( <b>f</b> \)		15	75 150/
15	Public support percentage for 2024 (line 8, c Public support percentage from 2023 Sched	` '	•	. , ,		16	75.15% 74.74%
16 Sec	ction D. Computation of Investmen					10	74.7470
17	Investment income percentage for 2024 (line			olumn (f))		17	6.47%
18	Investment income percentage for 2024 (line Investment income percentage from 2023 S					18	7.86%
	33 1/3% support tests—2024. If the organi					-	7.007
	not more than 33 1/3%, check this box and s						X
b	33 1/3% support tests—2023. If the organi				-		<del>-</del>
	line 18 is not more than 33 1/3%, check this	box and <b>stop here</b>	. The organization	qualifies as a pub	licly supported orga	anization	
20	Private foundation. If the organization did	not check a box on	line 14, 19a, or 19	b, check this box a	and see instructions	<b>3</b>	

Schedule A (Form 990) 2024 222 FOUNDATION 82-4823763 Page **4** 

#### 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

- 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**.
- 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.)

	Yes	No
1		
2		
3a		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9с		
10a		
10b		

	alle A (Form 990) 2024 222 FOUNDATION	82-4823763	Р	age <b>5</b>
Part	Supporting Organizations (continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		162	NO
	A person who directly or indirectly controls, either alone or together with persons described on lines 11b ar	nd		
-	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
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 <b>Part VI</b> .	11c		
Secti	ion B. Type I Supporting Organizations		1	
		<u> </u>	Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's off	cers,		
	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 su	Innorted		
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated amo	W.		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	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 <b>Pa</b>	ert		
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	ion C. Type II Supporting Organizations	•		•
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the director			
	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			
Saati	the supported organization(s).	1		
Seci	ion D. All Type III Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		163	140
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the p			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies o			
	organization's governing documents in effect on the date of notification, to the extent not previously provide			
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 \	<b>/I</b> 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 ha	ve		
	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			
04	supported organizations played in this regard.	3		
	ion 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.  The organization satisfied the Activities Test. Complete <b>line 2</b> below.	ar (see instruction	IS).	
а				
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity.	y (see instructions).		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes	of		
	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
	those supported organizations and explain how these activities directly furthered their exempt purpose			
	how the organization was responsive to those supported organizations, and how the organization determine	_		
h	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would			
	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>	20		
а	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? <i>If "Yes" or "No," provide details in <b>Part VI.</b></i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard		L	L

 Schedule A (Form 990) 2024
 222 FOUNDATION
 82-4823763
 Page 6

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Or	gar	nizations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying			,
instructions. All other Type III non-functionally integrated supporting organ	izati	ons must complete Sections	s A through E.
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year
		(71) THOI TOU	(optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4	0	0
5 Depreciation and depletion	5		
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)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	0	C
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current 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):			
a Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d	0	0
e Discount claimed for blockage or other factors			
(explain in detail in <b>Part VI</b> ):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3	0	С
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
see instructions).	4	0	0
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0	C
6 Multiply line 5 by 0.035.	6	0	0
7 Recoveries of prior-year distributions	7	0	0
8 Minimum Asset Amount (add line 7 to line 6)	8	0	0
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		C
2 Enter 0.85 of line 1.	2		0
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		0
4 Enter greater of line 2 or line 3.	4		0
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		C
7 Check here if the current year is the organization's first as a non-functionally		egrated Type III supporting	
instructions).			` `

Schedule A (Form 990) 2024 222 FOUNDATION 82-4823763 Page **7** 

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 3 4 Amounts paid to acquire exempt-use assets 4 Qualified set-aside amounts (prior IRS approval required—provide details in Part VI) 5 6 Other distributions (describe in Part VI). See instructions. 6 **7 Total annual distributions.** Add lines 1 through 6. 7 8 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. **9** Distributable amount for 2024 from Section C, line 6 9 0 **10** Line 8 amount divided by line 9 amount 10 0.000 Underdistributions Section E - Distribution Allocations (see instructions) Distributable **Excess Distributions** Pre-2024 Amount for 2024 Distributable amount for 2024 from Section C, line 6 0 Underdistributions, if any, for years prior to 2024 (reasonable cause required—explain in Part VI). See instructions. Excess distributions carryover, if any, to 2024 From 2019 . . . . . . . 0 **b** From 2020. 0 c From 2021. . From 2022. 0 e From 2023. **Total** of lines 3a through 3e **g** Applied to underdistributions of prior years Applied to 2024 distributable amount Carryover from 2019 not applied (see instructions) Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2024 from Section D, line 7: a Applied to underdistributions of prior years 0 **b** Applied to 2024 distributable amount Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2025. Add lines 3j and 4c. Breakdown of line 7: a Excess from 2020. 0 0 **b** Excess from 2021. 0 c Excess from 2022 d Excess from 2023 0 e Excess from 2024 0

 Schedule A (Form 990) 2024
 222 FOUNDATION
 82-4823763
 Page 8

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.)					
	<del></del>					
	<del></del>					
	······································					

# SCHEDULE D (Form 990)

(Rev. December 2024)

Department of the Treasury Internal Revenue Service Name of the organization

## **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

Open to Public Inspection

Employer identification number

222 FOUNDATION 82-4823763								
Part	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts							
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6.							
		(a) Donor advised funds	(b) Funds and other accounts					
1	Total number at end of year							
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 ad	lyisors in writing that the assets held in	donor advised					
3	funds are the organization's property, subject to the							
6	Did the organization inform all grantees, donors, an	-						
0	only for charitable purposes and not for the benefit							
	• •	· · · · · · · · · · · · · · · · · · ·						
	conferring impermissible private benefit?		Yes No					
Part		`						
	Complete if the organization answered "							
1	Purpose(s) of conservation easements held by the							
	Preservation of land for public use (for example, re	creation or education) Preservation	of a historically important land area					
	Protection of natural habitat	Preservation	n of a certified historic structure					
	Preservation of open space	•						
2	Complete lines 2a through 2d if the organization he	ld a gualified conservation contribution	in the form of a conservation					
_	easement on the last day of the tax year.	id a qualified conservation contribution	Held at the End of the Tax Year					
_								
a	Total number of conservation easements		2a 2b					
b	Total acreage restricted by conservation easements							
C	Number of conservation easements on a certified h Number of conservation easements included on line		. 20					
d	not on a historic structure listed in the National Reg		2d					
2	Number of conservation easements modified, trans							
3								
4	the organization during the tax year							
4	Number of states where property subject to consen							
5	Does the organization have a written policy regarding							
_	violations, and enforcement of the conservation eas							
6	Staff and volunteer hours devoted to monitoring, ins		forcing					
_	0 ,							
7	Amount of expenses incurred in monitoring, inspect		•					
	3		\$					
8	Does each conservation easement reported on line							
_	and section 170(h)(4)(B)(ii)?		Yes No					
9	In Part XIII, describe how the organization reports co							
	sheet, and include, if applicable, the text of the footnot		ents that describes the					
	organization's accounting for conservation easemen							
Part			Other Similar Assets					
	Complete if the organization answered "							
1a	If the organization elected, as permitted under FAS							
	works of art, historical treasures, or other similar as	•						
	public service, provide in Part XIII the text of the foo							
b	If the organization elected, as permitted under FAS							
	of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public							
	service, provide the following amounts relating to the							
	(i) Revenue included on Form 990, Part VIII, line 1							
	(ii) Assets included in Form 990, Part X							
2	If the organization received or held works of art, his	torical treasures, or other similar assets	s for financial gain, provide the					
	following amounts required to be reported under FA	ASB ASC 958 relating to these items.						
а	Revenue included on Form 990, Part VIII, line 1.		\$					
<b>L</b>	Accete included in Form 000, Part V		Φ					

d Additions during the year	Part	<b>III</b> Organizations Maintaining Colle	ctions of A	rt, Histo	rical Tre	asures, or	Other Si	milar Assets	(conti	nued)	
a	3	Using the organization's acquisition, accessi	on, and other	records,	check any	of the followi	ng that ma	ke significant	use of it	s	
Description of future generations   Preservation for future generations		collection items (check all that apply).			-						
c   Proservation for future generations	а	Public exhibition		d	Loan or	exchange pro	ogram				
c   Proservation for future generations	b	Scholarly research		е	Other						
Privide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.  Part IV Exercise and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.  Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?  Is a splinning behance	c				•						
Sull			ollections and	evolain h	ow they fu	irther the oras	anization's	exempt nurno	se in Pa	art	
assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	7		onconons and	Схріані н	ow they le	iraici aic orga	ariiZatioi i s	exempt purpo	30 1111 0	41.0	
assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	5	During the year did the organization solicit	or receive don	ations of	art histori	cal treasures	or other s	imilar			
Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?    Ves   No	3								□ v	هد ا	Nο
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 10.    The standard of Form 990, Part X   Ind	Dort			- da do par		garnzadori o			<u> </u>	<u>~</u>	110
13   15   15   15   15   15   15   15	Part			n Form (	000 Dart	IV line 0 o	r roporto	d an amount	on Fo	m	
1a is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?  b   fYes,* explain the arrangement in Part XIII and complete the following table.			sied ies o	ii i Oiiii s	oo, ran	10, 1116 3, 6	i reporte	d an amount	OII I OI		
No   If "Yes," explain the arrangement in Part XIII and complete the following table:    C	1a		ian or other i	ntermedia	ry for cont	ributions or o	ther asset	s not			
Beginning balance	ıa				-		tilei asset	31100	☐ Y4	25	Nο
Beginning balance   1c	b							•	ш.,	~	
d Additions during the year		<b>g</b>			9			Α	mount		
d Additions during the year    Distributions during the year   1	С	Beginning balance					1c				0
f Ending balance	d						1d				
f Ending balance	е						1e				
B	f						1f				0
B	2a	Did the organization include an amount on F	orm 990. Par	t X. line 2	1. for escr	ow or custodi	al account	liability?	Y	es X	No
Part V	_	<del>-</del>				, ,		-			
Complete if the organization answered "Yes" on Form 990, Part IV, line 10.    Complete if the organization answered "Yes" on Form 990, Part IV, line 10.   Combination   Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.   Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.   Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.   Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.   Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.   Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.   Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.   Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.   Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.   Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.   Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.   Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.   Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.   Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part IV			. Officer field	ii tiic cxpi	anation na	as been provi	ded iii i ai				
(a) Current year   (b) Prior year   (c) Two years back   (d) Three years back   (e) Four years back   (e) Fo	Parı		arad "Vaa" a	n Eorm (	000 Dort	IV line 10					
Beginning of year balance					_		haal (d)	Three veers beak	(2) [2		h a alı
b Contributions	10			(D) Pili	, ,	(c) Two years		Tillee years back	(e) F0	ui yeais	Dack
c Net investment earnings, gains, and losses	_				0						
and losses		<del> </del>									
Content of scholarships   Content of schol	C	9 1 9									
e Other expenditures for facilities and programs .  f Administrative expenses . g End of year balance . 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	А		**								
## Administrative expenses		· · · · · · · · · · · · · · · · · · ·									
f Administrative expenses. g End of year balance. 0 0 0 0 0 0 0 0  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment % b Permanent endowment % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations. (ii) Related organizations. (iii) Related organizations. (iii) Related organizations. (iii) Related organizations.  b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  Describe in Part XII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (other) (investment) (b) Cost or other basis (other) (c) Accumulated depreciation depreciation  1a Land. 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	·	•									
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:   Board designated or quasi-endowment	f	· ·							1		
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  Board designated or quasi-endowment			0		0		0	(			0
Board designated or quasi-endowment	2		rent year end	balance (	line 1g, co	lumn (a)) hel	d as:				
b Permanent endowment	а				0.	( //					
The percentages on lines 2a, 2b, and 2c should equal 100%.  Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) Unrelated organizations	b		%								
Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) Unrelated organizations.  (ii) Related organizations.  (iii) Related organizations.  (iii) Related organizations.  (iv) Schedule R?  (iv) Schedule	С	Term endowment %	,								
No   No   No   No   No   No   No   No		The percentages on lines 2a, 2b, and 2c sho	ould equal 100	)%.							
(ii) Unrelated organizations	3a	Are there endowment funds not in the posse	ession of the o	rganizatio	n that are	held and adr	ninistered	for the			
(ii) Related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?		organization by:								Yes	No
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?		(i) Unrelated organizations							3a(i)		
Describe in Part XIII the intended uses of the organization's endowment funds.  Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other) (investment)  (b) Cost or other basis (other) (c) Accumulated depreciation  (d) Book value  (d) Book value									3a(ii)		
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Description of property   (a) Cost or other basis (other)   (c) Accumulated depreciation	b			•					3b		
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Description of property   (a) Cost or other basis (investment)   (b) Cost or other basis (other)   (c) Accumulated depreciation	4	Describe in Part XIII the intended uses of the	e organization	's endowr	ment funds	S.					
Description of property         (a) Cost or other basis (investment)         (b) Cost or other basis (other)         (c) Accumulated depreciation           1a         Land	Part										
1a         Land         0         0         0           b         Buildings         0         0         0         0           c         Leasehold improvements         0         0         0         0         0           d         Equipment         0         0         0         0         0           e         Other         0         0         0         0         0		Complete if the organization answe	ered "Yes" o	n Form 9	<u>990, Part</u>	IV, line 11a	ı. See Fo	<u>rm 990, Part</u>	X, line	10.	
1a       Land		Description of property	, ,		` '				( <b>d</b> ) B	ook value	•
b         Buildings         0         0         0           c         Leasehold improvements         0         0         0         0           d         Equipment         0         0         0         0           e         Other         0         0         0         0			(investm		(0		depre	eciation			
c         Leasehold improvements         0         0         0           d         Equipment         0         0         0         0           e         Other         0         0         0         0         0	_										0
d         Equipment         0         0         0         0           e         Other         0         0         0         0		•									0
<b>e</b> Other											0
											0
			aud Farra 00		line 10-	-		0			0

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 0 (2) ROU Liability 12,490 (3) (4) (5) (6) (7) (8) (9)	Part VII	Investments—Other Securities			
Cost or end-d-year market value   Cost or end-d-year market value		-	"Yes" on Form 990,		
30 Other   INVESTMENTS   0   179,962   F		(a) Description of security or category (including name of security)	(b) Book value		
3) Oline   INVESTMENTS   179,962   F					
A		• •			
(B)   (C)			179,962	F	
Col.   Column (b) must equal Form 990, Part X, line 12, col. (B).   179,962					
Col.   Column (b) must equal Form 990, Part X line 12, col. (B)   179,962					
E				<b>A</b>	
Fig.					
Section   Sect					1
Column (b) must equal Form 990, Part X, line 12, cot (B)).   179.962					<del>)</del>
Total (Column (b) must equal Form 990, Part X, line 12, col. (B)   Total (Column (b) must equal Form 990, Part X, line 13, col. (B)   Total (Column (b) must equal Form 990, Part X, line 15, col. (B)   Total (Column (b) must equal Form 990, Part X, line 15, col. (B)   Total (Column (b) must equal Form 990, Part X, line 15, col. (B)   Total (Column (b) must equal Form 990, Part X, line 15, col. (B)   Total (Column (b) must equal Form 990, Part X, line 15, col. (B)   Total (Column (b) must equal Form 990, Part X, line 15, col. (B)   Total (Column (b) must equal Form 990, Part X, line 15, col. (B)   Total (Column (b) must equal Form 990, Part X, line 15, col. (B)   Total (Column (b) must equal Form 990, Part X, line 15, col. (B)   Total (Column (b) must equal Form 990, Part X, line 15, col. (B)   Total (Column (b) must equal Form 990, Part X, line 15, col. (B)   Total (Column (b) must equal Form 990, Part X, line 15, col. (B)   Total (Column (b) must equal Form 990, Part X, line 15, col. (B)   Total (Column (b) must equal Form 990, Part X, line 15, col. (B)   Total (Column (b) must equal Form 990, Part X, line 15, col. (B)   Total (Column (b) must equal Form 990, Part X, line 15, col. (B)   Total (Column (b) must equal Form 990, Part X, line 15, col. (B)   Total (Column (b) must equal Form 990, Part X, line 15, col. (B)   Total (Column (b) must equal Form 990, Part X, line 15, col. (B)   Total (Column (b) must equal Form 990, Part X, line 25, col. (B)   Total (Column (b) must equal Form 990, Part X, line 25, col. (B)   Total (Column (b) must equal Form 990, Part X, line 25, col. (B)   Total (Column (b) must equal Form 990, Part X, line 25, col. (B)   Total (Column (b) must equal Form 990, Part X, line 25, col. (B)   Total (Column (b) must equal Form 990, Part X, line 25, col. (B)   Total (Column (b) must equal Form 990, Part X, line 25, col. (B)   Total (Column (b) must equal Form 990, Part X, line 25, col. (B)   Total (Column (b) must equal Form 990, Part X, line 25, col. (B)   Total (Column (b) must equal Form					·
Investments   Program Related   Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.		on (h) must equal Form 900, Part Y line 12, col. (R))	179 962		
Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.			170,002		
Cost or end-of-year market value	Pait VIII		"Yes" on Form 990,	Part IV, line 11c. See Form 9	90, Part X, line 13.
(2)   (3)   (4)   (5)   (6)   (7)   (8)   (9)   (7)   (9)   (1)		(a) Description of investment	(b) Book value		
(3)	(1)				
(4)	(2)				
(6)	(3)				
(6)	(4)		•		
(7) (8) (9) (7) (10) (10) must equal Form 990, Part X, line 13, col. (10) (10) (10) (10) (10) (10) (10) (10)	(5)				
(8) (9) Total. (Column (b) must equal Form 990, Part X, line 13, col. (B)).  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) must equal Form 990, Part X, line 15.  (b) Book value  (c) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, line 15, col. (B)).  Other Liabilities  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  (a) Description of liability (b) Book value  (1) Federal income taxes (a) Description of liability (b) Book value  (1) Federal income taxes (a) Description of liability (b) Book value  (1) Federal income taxes (a) Description of liability (b) Book value (c) Form 990, Part X, line 15, col. (B)) (d) (e) (e) (f) (e) (f)	(6)				
Column   (b)   must equal Form 990, Part X, line 13, col.   (B)	(7)			•	
Total. (Column (b) must equal Form 990, Part X, line 13, col. (B))   Other Assets			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
Part IX					
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, line 15, col. (B))			0		
(a) Description (b) Book value  (1) (2) (3) (4) (5) (6) (7) (8) (9) (7) (8) (9) (7) (10) (10) (10) (10) (10) (10) (10) (10	Part IX		IIV III	Don't IV. Box 44 L Oxy France O	00 Dest V Pres 45
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))				Part IV, line 11d. See Form 9	
(2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	(4)	(a) Descr	iption		(b) Book value
(3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))					
(4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))					
(5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))					
(6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))					
(7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))					
(8) (9)  Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))		X			
(9)         Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))       0         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       0         (2) ROU Liability       12,490         (3)       (4)         (4)       (5)         (6)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))       12,490					
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))					
Other Liabilities   Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.		umn (b) must equal Form 990, Part X, line 15, o	col. (B))		0
1.       (a) Description of liability       (b) Book value         (1) Federal income taxes       0         (2) ROU Liability       12,490         (3)       (4)         (5)       (6)         (6)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))       12,490		Other Liabilities Complete if the organization answered		Part IV, line 11e or 11f. See F	Form 990, Part X,
(1) Federal income taxes 0 (2) ROU Liability 12,490 (3) (4) (5) (6) (7) (8) (9) (9) (7) (10,10					
(2) ROU Liability (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	1.		tion of liability		(b) Book value
(3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))					0
(4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))		Liability			12,490
(5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))					
(6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))					
(7)         (8)         (9)         Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))					
(8) (9) Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))					
(9) Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))					
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))					
	• •	man (h) must asual Farma 000 Fart V Har OF	nel (D))		40.400
4. Liability for uncertain tax positions. In Part XIII, provide the text of the foothote 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					

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue per Re Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	turn	
1	Total revenue, gains, and other support per audited financial statements	1	722,933
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	•	122,933
a	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d	2e	2,881
3	Subtract line 2e from line 1	3	720,052
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		720,002
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a 947		
b	Other (Describe in Part XIII.)		
	Add lines 4a and 4b	4c	947
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	720,999
Part	TXII Reconciliation of Expenses per Audited Financial Statements With Expenses per I	Returr	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	681,113
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	681,113
4	7 thound moradod on 1 only 600, 1 dit 17t, into 20, but not on into 1.		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 947		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	947
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	682,060
	XIII Supplemental Information		
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part IXI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional informa		e 4; Part X, line
Part 2	X Line 2 The organization is a nonprofit corporation that is exempt from income taxes		
	r Section 501 (c) 3 of the Internal Revenue Code and reported no unrelated business		
	ne for the year ended December 31, 2024, Management represents there are no uncertain		
tax p	osition or other provisions for income taxes that should be recognized in these		
	cial statements.		
	· · · · · · · · · · · · · · · · · · ·		

Schedule D (Form 990) (Rev. 12-2024) 222 FOUNDATION	82-4823763	Page <b>5</b>
Part XIII Supplemental Information (continued)		
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<b>*</b> ( )		

# SCHEDULE F (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

## **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.

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

OMB No. 1545-0047

Open to Public

Name of the organization
222 FOUNDATION

Inspection
Employer identification number

82-4823763

Par	General Inform Form 990, Part IV		vities Outside	e the United States. Com	plete if the organization answ	ered "Yes" on		
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?							
2	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. (T	he following Par	t I, line 3 table c	an be duplicated if additional	space is needed.)			
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region		
(1)					9)			
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)			)					
(10)								
(11)	<u> </u>							
(12)		W						
(13)								
(14)								
(15)								
(16)								
(17)								
	Subtotal	0	0			0		
	Total from continuation					Ì		
	sheets to Part I	0	0			0		
С	Totals (add lines 3a and 3b)	0	0			0		

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part II Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. (b) IRS code (d) Purpose of (e) Amount of (a) Name of (c) Region (f) Manner of (a) Amount of (h) Description (i) Method of organization section and EIN grant cash grant cash noncash of noncash assistance valuation (if applicable) disbursement assistance (book, FMV, appraisal, other) (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)(11) (12)(13)(14)(15) (16)Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . .

Schedule F (Form 990) (Rev. 12-2024) 222 FOUNDATION 82-4823763 Page **3** 

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

line 16. Part III can	be duplicated if additional sp	ace is needed					
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	<b>(d)</b> 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)
Grants	South America			Paid to US		4	
(1)		4	18,138	Educational			
Grants	North America			Paid to US			
(2)		2	9,500	Educational			
Grants	East Asia and the Pacific			Paid to US			
(3)		6	25,304	Educational			
Grants (4)	Europe (Including Iceland and Greenland)	4		Paid to US Educational			
Grants (5)	South Asia	5		Paid to US Educational			
Grants	Sub-Saharan Africa			Paid to US Educational			
(6)		3	12,476	Educational			
_(9)		<b>*</b> (					
<u>(10)</u>							
(11)							
<u>(12)</u>	4(						
(13)	C/r,						
(14)							
(15)							
(16)							
<u>(17)</u>							
(18)							

Schedule F (Form 990) (Rev. 12-2024) 222 FOUNDATION 82-4823763 Page **4** 

Part IV	Foreign	<b>Forms</b>
<b>G. G. J</b>		

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 the Instructions for Form 926)
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 the Instructions for Forms 3520 and 3520-A; don't file with Form 990)
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 the Instructions for Form 5471)
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 the Instructions for Form 8621)
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 the Instructions for Form 8865)
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 the Instructions for Form 5713; don't file with Form 990)

Schedule F (Form 990) (Rev. 12-2024)

Part V	Supplemental	Information
I all v	Subblelliellai	IIIIOIIIIauoii

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

Part I Line 2 Students are required to submit a tuition statement from their school at the
beginning of the semester and then a receipt at the end of the semeter to verify that
there was no overpayment. All funds are sent directly to the school
A
<del></del>
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### SCHEDULE I (Form 990)

Rev. December 2024)

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 instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization							Employer identification number	
222 FOUNDATION						82	-4823763	
Part I General Informatio	n on Grants	and Assistance						
<ol> <li>Does the organization mainta and the selection criteria used</li> <li>Describe in Part IV the organi</li> </ol>	d to award the g	rants or assistance	?			assistance,	X Yes No	
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.								
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 non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance	
(1)					<b>U</b> )			
(2)								
(3)								
(4)								
(5)			10					
(6)								
(7)		1.1						
(8)								
(9)	10	U						
(10)								
(11)								
(12)								
<ul><li>2 Enter total number of section</li><li>3 Enter total number of other or</li></ul>		_					0	

222 FOUNDATION 82-4823763 Schedule I (Form 990) (Rev. 12-2024)

Page **2** 

(a) Type of grant or assistance	<b>(b)</b> Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
olarship		,			
•	37	128,841			
					<u> </u>
					•
				( ) ,	
Supplemental Information. P	rovide the information re	guired in Part I. line	2: Part III. columi	n (b): and any other additi	onal information.
ne 2 Students are required to submit a tu					
nd of the semeter to verify that there was				·	
		·			
<b>×</b>					

#### **SCHEDULE 0**

(Form 990)

(Rev. December 2024)

Department of the Treasury Internal Revenue Service Name of the organization

## 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 instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization	Employer identification number						
222 FOUNDATION	82-4823763						
Form 990, Part I, Line 1: MINISTRY LEADERS OF THE WORLD. IN ADDITION TO FINANCIAL ASSISTANCE,							
OUR GOAL IS TO INVEST IN EACH OF OUR STUDENT PARTNERS IN THREE AREAS: PERSO	ONAL GROWTH,						
SPIRITUAL GROWTH, AND MINISTRY DEVELOPMENT.							
Form 990, Part VI, Section B, Line 11b: THE FORM 990 IS PREPARED BY AN OUTSIDE ACCOU	JNTING FIRM						
AND IS REVIEWED BY MEMBERS OF THE BOARD.							
Form 990, Part VI, Section B, Line 12c: ALL BOARD MEMBERS ARE AWARE OF THE CONFLIC	T OF						
INTEREST POLICY AND THAT THEY ARE REQUIRED TO DISCLOSE CONFLICTS. ANY, AND	ALL, CONFLICTS OF						
INTEREST (IF THEY EXIST) ARE DISCUSSED AND ADDRESSED BY THE BOARD IN ACCORD	DANCE WITH THE						
POLICY.							
Form 990, Part VI, Section B, Line 15: THE COMPENSATION FOR THE EXECUTIVE DIRECTOR	IS APPROVED						
BY THE BOARD OF DIRECTORS AND COMPARED WITH OTHER SIMILAR NON-PROFITS.							
Form 990, Part VI, Section C, Line 19: DOCUMENTS ARE AVAILABLE UPON REQUEST AND A	Г <b>/</b>						
GUIDESTAR.COM							