* *	PUBLIC	DISCLOSURE	COPY

Extended to November 15, 2021

* *

 Return of Organization Exempt From Income Tax

 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.

OMB No. 1545-0047 Open to Public Inspection

Departr	nent o	of the	Treasur
Internal	Reve	nue S	Service

Form **990**

Α	For the	2020 calendar year, or tax year beginning and endir	ing		
в	Check if	C Name of organization		D Employer identifie	cation number
	applicable				
	Addres	America's Future Foundation			
Name chang		Doing business as		52-19283	21
	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room	m/suite	E Telephone number	r
	Final return/	1633 Connecticut Ave. NW 300	0 [(202) 81	
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	1,753,325.
	Ameno	^{ed} Washington, DC 20009		H(a) Is this a group re	
	Applic tion	F Name and address of principal officer: CIIICy CEIQUICEIIA		for subordinates	? 🔤 Yes 🔀 No
	pendin	^g same as C above		H(b) Are all subordinates in	
Т	Tax-exe	mpt status: 🚺 501(c)(3) 🛄 501(c) ()◀ (insert no.) 🛄 4947(a)(1) or 🛄	527	lf "No," attach a	list. See instructions
		e:▶ www.americasfuture.org		H(c) Group exemption	n number 🕨
к	Form of	organization: 🔟 Corporation 🔄 Trust 🔄 Association 🔄 Other 🕨 🛛 🛛	L Year o	f formation: 1995 N	State of legal domicile: DC
Ρ		Summary			
ė	1	Briefly describe the organization's mission or most significant activities:	ssio	n of America	a's Fullure
Activities & Governance		Foundation is to develop lifelong effective			
ern	2	Check this box $ig > igsquart$ if the organization discontinued its operations or disposed o	of more	than 25% of its net as	sets.
Š	3	Number of voting members of the governing body (Part VI, line 1a)			7
ۍ ه	4	Number of independent voting members of the governing body (Part VI, line 1b)			7
ies	5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)			12
ivit	6	Total number of volunteers (estimate if necessary)		6	27
Act	7 a '	Total unrelated business revenue from Part VIII, column (C), line 12			0.
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
				Prior Year	Current Year
e	8	Contributions and grants (Part VIII, line 1h)		2,289,664.	1,713,447.
ent	9	Program service revenue (Part VIII, line 2g)		75,445.	36,203.
Revenue	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		190.	212.
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		322.	3,463.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,365,621.	1,753,325.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	🖵	0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		458,076.	950,287.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Ř	b	Total fundraising expenses (Part IX, column (D), line 25) ► 178,684.	·	655 267	469 122
_	11	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		655,267. 1,113,343.	468,132. 1,418,419.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,252,278.	334,906.
10	2 19	Revenue less expenses. Subtract line 18 from line 12			
Net Assets or			Beg	jinning of Current Year 2,104,028.	End of Year 2,463,105.
Rals	20	Total assets (Part X, line 16)		85,023.	109,194.
let A	21	Fotal liabilities (Part X, line 26)		2,019,005.	2,353,911.
Ē	art II	Net assets or fund balances. Subtract line 21 from line 20		2,019,009.	2,333,711.
		ties of perjury, I declare that I have examined this return, including accompanying schedules and	1 stateme	ints and to the best of my	v knowledge and belief, it is
	-	t, and complete. Declaration of <i>Meparer (other than officer</i>) is based on all information of which pi			
	,		propulor i	6/29/20	121 ^[2]
Sig	ın	Signature of officer		Date	
He		Cindy Cerquitella, Executive Director			
		Type or print name and title			
		Print/Type preparer's signature	Da	ate Check	PTIN
Pai	d	Jie Chen, CPA	0	6/29/21 ^{if} self-employe	P01049760
Pre	parer	Firm's name Rogers & Company FLLC		Firm's EIN 🕨	58-2676261
Use	e Only	Firm's address 8300 Boone Boulevard, Suite 600			•
_		Vienna, VA 22182		Phone no. (7	<mark>03</mark>) 893-0300
Ma	v the IF	S discuss this return with the preparer shown above? See instructions			X Yes No

032001 12-23-20 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form	America's Future Foundation	52-1928	321	Page 2
	rt III Statement of Program Service Accomplishments		_	r ugo =
	Check if Schedule O contains a response or note to any line in this Part III			X
1	Briefly describe the organization's mission:			
	The mission of America's Future Foundation is to identi	fy and c	level	op
	young professional leaders for liberty by providing uni	que		
	educational, networking, and professional development p	rograms	in	
	Washington, DC and chapters throughout the country.			
2	Did the organization undertake any significant program services during the year which were not listed on the	I	XYes	
	prior Form 990 or 990-EZ?	I	A Yes	└── No
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services'	- I	Vaa	X No
3	If "Yes," describe these changes on Schedule O.	۲ ۱		
4	Describe the organization's program service accomplishments for each of its three largest program services, a	s measured by	expenses	
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to oth			
	revenue, if any, for each program service reported.	,	, ,	
4a	(Code:) (Expenses \$ 627,391. including grants of \$) (Reve			203.)
	Networking, educational, and professional development p			
	identify and develop young professional leaders for lik	erty inc	lude	
	seminars, roundtables, debates, gala, networking lunche	s, and t	he	
	leading blog on professional development issues for the			
	movement. Chapters throughout the country host networki	ng progr	rams,	
	guest speakers, panel discussions, and debates.			
4b	(Code:) (Expenses \$397,504. including grants of \$) (Reve	nue \$)
	Talent Market - Talent Market provides search and talen			
	services free of charge to nonprofit organizations that			
	mission. By promoting open positions, managing the init providing guidance to nonprofits they help simplify the	lai sear	nnog	
	for hundreds of nonprofits around the country.	IIIIIII	proc	222
4c	(Code:) (Expenses \$ including grants of \$) (Reve	nue \$)
4-1	Other program convises (Deservice on Schodule O)			
4d	Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)	
4e	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ▶ 1,024,895.)	
			Form 9	90 (2020)

Form	990	(2020)

Form 990 (2020)America's Future FoundationPart IVChecklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			37
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			37
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
_	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			v
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		37	
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			37
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			37
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			v
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u> </u>
t	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		х	
	Schedule D, Parts XI and XII	12a	Δ	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	10		x
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i>	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
a	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		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	140		
15	foreign organization Per Ves, " complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		<u> </u>
.,	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			<u> </u>
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	.0		<u> </u>
15		19		x
20a	complete Schedule G, Part III	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x

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 Form 990 (2020)
 America's Future Foundation

 Part IV
 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			l
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
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	Х	──
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			37
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		<u> </u>
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			v
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	051		x
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	00		x
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	21		- 25
20	instructions, for applicable filing thresholds, conditions, and exceptions):			
2	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
a	"Yes," complete Schedule L, Part IV	28a		x
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	20a 28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?/	200		
U	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete</i>			
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	<u> </u>		<u> </u>
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			1
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 32	-		
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		37	
	(gambling) winnings to prize winners?	1c	Х	L

Form 990	(2020)
Part V	Sta

			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 12				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X	
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		X	
b	If "Yes," enter the name of the foreign country >				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			37	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X	
c	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	•		х	
	any contributions that were not tax deductible as charitable contributions?	6a			
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Ch.			
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).	6b			
7	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?	70		х	
a b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b			
b c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	10			
U	to file Form 8282?	7c		х	
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	10			
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		Х	
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.				
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12 10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b				
11	Section 501(c)(12) organizations. Enter:				
	Gross income from members or shareholders 11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a			
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a			
d	Is the organization licensed to issue qualified health plans in more than one state?	ISa			
h	Enter the amount of reserves the organization is required to maintain by the states in which the				
5	organization is licensed to issue qualified health plans 13b				
С	Enter the amount of reserves on hand				
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х	
	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		х	
	If "Yes," see 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.				

Form **990** (2020)

Form 990	(2020)
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America's Future Foundation

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No

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

Pa Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes 7 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule 0. 7 **b** Enter the number of voting members included on line 1a, above, who are independent 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a b Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the 9 organization's mailing address? If "Yes," provide the names and addresses on Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Х 10a **10a** Did the organization have local chapters, branches, or affiliates? **b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, Х and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Х **11a** Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 Х 12a Х **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe х in Schedule O how this was done 12c Χ Did the organization have a written whistleblower policy? 13 13 Did the organization have a written document retention and destruction policy? Х 14 14 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? a The organization's CEO, Executive Director, or top management official 15a b Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a 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 16b exempt status with respect to such arrangements?

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed DC, MI, VA

18	Section 6104 requires	an organization to make its Fe	orms 1023 (1024 or 1024-)	A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available
	· ·	Indicate how you made these			
	Own website	Another's website	X Upon request	Other (explain on Schedule O)	

19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial
	statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records Cindy Cerquitella – (202) 817–3383	

1633 Connecticut Ave. NW, No. 300, Washington, DC20009

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 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 and/or Box 7 of Form 1099-MISC) 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 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)	(B)	(C)					(D)	(E)	(F)	
Name and title	Average	Position (do not check more than one) than	one	Reportable	Reportable	Estimated	
	hours per	box	box, unless person is both an		compensation	compensation	amount of			
	week		officer and a director/trustee)		lee)	from	from related	other		
	(list any	ndividual trustee or director	irecto					the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	rustee	nstitutional trustee		ee	npen		(00-2/1099-00130)		and related
	below	d ual t	utiona	L_	mploy	st col	5			organizations
	line)	Indivi	Institu	Officer	Key employee	Highest compensated employee	Former			5
(1) Claire Kittle Dixon	40.00									
Executive Director, Talent Market						X		157,784.	0.	1,873.
(2) Cindy Cerquitella	45.00									
Executive Director				X				142,500.	0.	0.
(3) Richard Lorenc	1.00									
Chair		Х		х				0.	0.	0.
(4) Kathleen O'hearn	1.00									
Vice Chair		Х		Х				0.	0.	0.
(5) Charles Cirame	1.00									
Director		Х						0.	0.	0.
(6) Jeff Berkowitz	1.00									_
Director		Х						0.	0.	0.
(7) Brian Wilson	1.00									_
Treasurer		Х		х				0.	0.	0.
(8) Peter Lipsett	1.00									_
Director		Х						0.	0.	0.
(9) John Tillman	1.00									
Secretary		Х		X				0.	0.	0.
				-	-		<u> </u>			
				-	-					·
		L		L		L				– – – – – – – – – –

	990 (2020) America's	s Future	e I	Τοι	ind	lat	tic	on		52-19)283	321	P	age 8
Par	VII Section A. Officers, Directors, Trust	tees, Key Em	ploy	vees,	, and	d Hi	ghe	st C	Compensated Employe	es (continued)				
	(A)	(B)			(0		•		(D)	(E)			(F)	
	. ,	Name and title Average Position Benottable Benottable										h		
		hours per					than is bot			compensatio	n		nount	
		week					pr/trus		from	from related			other	01
		(list any	tor						the	organizations			pensa	tion
		hours for	direct				_		organization	(W-2/1099-MIS			om th	
		related	e or	tee			sate		(W-2/1099-MISC)		<i>o,</i>		anizat	
		organizations	ruste	l trus		ee	nper					•	d relat	
		below	l ual t	tiona		ploy	st col yee	L					nizati	
		line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				orge	a neaci	0110
		,	ul	드	ò	¥	тэ	Ē			\rightarrow			
											-+			
											\rightarrow			
											$ \rightarrow $			
1b	Subtotal								300,284.		0.		1,8	73.
	Total from continuation sheets to Part VI								0.		0.			0.
	Total (add lines 1b and 1c)								300,284.		0.		1 8	73.
-										000 of your out oh l			-/-	
2	Total number of individuals (including but no	ot limited to th	ose	liste	ed at	DOVe	e) wr	10 r	eceived more than \$100	,000 of reportable	9			2
	compensation from the organization												X	
													Yes	No
3	Did the organization list any former officer,	director, truste	ee, ł	key e	empl	loye	e, or	' hig	phest compensated emp	oloyee on				
	line 1a? If "Yes," complete Schedule J for su	uch individual										3		Х
4	For any individual listed on line 1a, is the su	m of reportab	le co	amc	ensa	atior	n and	d ot	her compensation from	the organization				
	and related organizations greater than \$150	-		-					-	-	- E	4	Х	
5	Did any person listed on line 1a receive or a									dual for convisoo	····· -	<u> </u>		
5		-				-			-			-		х
	rendered to the organization? If "Yes," comp	plete Schedule	e J T	or si	icn	pers	son .					5		Λ
Sec	ion B. Independent Contractors													
1	Complete this table for your five highest cor	npensated inc	depe	ende	ent c	onti	racto	ors t	that received more than	\$100,000 of com	pensa	ation f	rom	
	the organization. Report compensation for t	he calendar y	ear	endi	ng v	vith	or w	ithir	n the organization's tax	/ear.				
	(A)								(B)			(C	;)	
	Name and business	address	N	ONE	3				Description of s	ervices	Co		nsatio	n
								_						
										T				
2	Total number of independent contractors (ir	ncluding but n	ot li	mite	d to	tho	se lis	stec	d above) who received m	ore than				
	\$100,000 of compensation from the organiz	ration				(0							

				eri	ca's F	'ut	ure Foun	dation		52-1928	321 Page 9
Pa	rt VI										
			Check if Schedule O	conta	ains a respo	nse	or note to any lir	e in this Part VIII		(0)	
								(A) Total revenue	(B) Related or exempt		(D) Revenue excluded
								Total Toverlae	function revenue		from tax under
(0.10)											sections 512 - 514
nts	1 a	а	Federated campaigns								
Gra	ł		Membership dues								
ts,	C	С	Fundraising events								
ilar											
Sim,	e		Government grants (contr								
utio	f		All other contributions, gifts,			1					
Contributions, Gifts, Grants and Other Similar Amounts			similar amounts not included				713,447.				
pu		-	Noncash contributions included in					1 712 //7			
a O	1	h	Total. Add lines 1a-1f					1,713,447.			
•	-		Event				Business Code 900099	36,203.	36,203.		
/ice			Event				300033	50,205.	50,205.		
Ser		b				_					
ver Ver		C				_					
Program Service Revenue		d				_					
Pro	•	e r	All other prearem convice	*01/0							
_			All other program service Total. Add lines 2a-2f					36,203.			
	3	y	Investment income (includ					5072051			
	U		other similar amounts)	-				212.			212.
	4		Income from investment of								
	5		Royalties		•	•	-				
	-				(i) Real		(ii) Personal				
	6 a	а	Gross rents	6a							
			Less: rental expenses	6b							
		c Rental income or (loss) 6c									
	Ċ		d Net rental income or (loss)								
			Gross amount from sales of								
			assets other than inventory	7a							
	ł	b	Less: cost or other basis								
anı			and sales expenses	7b							
evenue	Ċ	с	Gain or (loss)	7c							
Ĕ.	c	d	Net gain or (loss)				►				
Other	8 8	а	Gross income from fundraising	ng ev	ents (not						
ð			including \$		of						
			contributions reported on	line	1c). See						
			Part IV, line 18			8a					
			Less: direct expenses			8b					
			Net income or (loss) from				►				
	9 a	а	Gross income from gamin	-							
		_	Part IV, line 19			9a					
			Less: direct expenses			9b					
			Net income or (loss) from			s	····· •				
	10 a		Gross sales of inventory,								
			and allowances								
			Less: cost of goods sold			10b					
	(С	Net income or (loss) from	sales	s of inventor	у	Business Code				
sne	44.4	_	Other income				900099	3,463.			3,463.
Miscellaneous Revenue		a b				_	500055	5,405.			5,205.
ella		5				_					
Re		ч Ч	All other revenue			-					
Σ			Total. Add lines 11a-11d					3,463.			
			Total revenue. See instruction					1,753,325.	36,203.	0.	3,675.

America's Future Foundation

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America's Future Foundation Part IX Statement of Functional Expenses

	Check if Schedule O contains a respons	e or note to any line in	this Part IX		X
	not include amounts reported on lines 6b, 8b, 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		•	<u> </u>	•
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	142 500	106 250	17 200	10 770
_	trustees, and key employees	142,500.	106,350.	17,380.	18,770
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	630,977.	470,907.	76,955.	83,115
7	Other salaries and wages	0.50,977.	4/0,30/•	10,900.	05,115
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	15,082.	9,964.	1,996.	3,122
•		104,099.	68,772.	13,776.	21,551
9	Other employee benefits	57,629.	42,740.	7,149.	7,740
10	Payroll taxes	57,025.	=2,7=0.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	/,/=0
11	Fees for services (nonemployees):				
a L		1,333.			1,333
b		33,192.		33,192.	1,555
с С	6 F	55,152.		55,152.	
	Lobbying Professional fundraising services. See Part IV, line 17				
e f	Investment management fees				
f					
g	column (A) amount, list line 11g expenses on Sch O.)	146,867.	121,896.	9,121.	15,850
12	Advertising and promotion	51,552.	44,841.	1,984.	4,727
13	Office expenses	71,792.	38,009.	16,422.	17,361
14	Information technology	16,835.	14,643.	648.	1,544
15	Royalties				_/
16	Occupancy	31,775.	1,504.	30,223.	48
17	Travel	74,147.	70,546.	1,172.	2,429
18	Payments of travel or entertainment expenses		,		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	30,411.	30,055.	356.	
20	Interest	· ·			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	566.		566.	
23	Insurance	5,725.	2,902.	1,807.	1,016
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 0.)				
а	Miscellaneous	3,937.	1,766.	2,093.	78
b		-,	_,	_,	. 0
c					
d					
e	All other expenses				
25 25	Total functional expenses. Add lines 1 through 24e	1,418,419.	1,024,895.	214,840.	178,684
2 <u>5</u> 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)				

America'	S	Future	Found	lation
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		Check if Schedule O contains a response or r	note to ar	y line in this Part X							
					(A) Beginning of year		(B) End of year				
	1	Cash - non-interest-bearing			867,301.	1	1,973,654.				
	2	Savings and temporary cash investments		253,909.	2	331,117.					
	3	Pledges and grants receivable, net		974,840.	3	141,486.					
	4	Accounts receivable, net		4							
	5	Loans and other receivables from any current									
		trustee, key employee, creator or founder, sul									
		controlled entity or family member of any of th		5							
	6	Loans and other receivables from other disqu									
		under section 4958(f)(1)), and persons describ	ction 4958(c)(3)(B)		6						
ts	7	Notes and loans receivable, net				7					
Assets	8	Inventories for sale or use				8					
A	9				5,153.	9	7,938.				
	10a	Land, buildings, and equipment: cost or other	·								
		basis. Complete Part VI of Schedule D	. 10a	5,633.							
	b	Less: accumulated depreciation	625.	10c	1,710.						
	11	Investments - publicly traded securities			11						
	12	Investments - other securities. See Part IV, line		12							
	13	Investments - program-related. See Part IV, lin		13							
	14	Intangible assets		14							
	15	Other assets. See Part IV, line 11	2,200.	15	7,200.						
	16	Total assets. Add lines 1 through 15 (must ed			2,104,028.	16	2,463,105.				
	17	Accounts payable and accrued expenses	85,023.	17	109,194.						
	18	Grants payable		18							
	19	Deferred revenue			19						
	20	Tax-exempt bond liabilities		20							
	21	Escrow or custodial account liability. Complet	e Part IV	of Schedule D		21					
es	22	Loans and other payables to any current or fo	ormer offic	cer, director,							
Liabilities		trustee, key employee, creator or founder, sul	ostantial	contributor, or 35%							
.iab		controlled entity or family member of any of th	-			22					
-	23	Secured mortgages and notes payable to unr				23					
	24	Unsecured notes and loans payable to unrela				24					
	25	Other liabilities (including federal income tax,									
		parties, and other liabilities not included on lin	les 17-24). Complete Part X							
		of Schedule D			05 000	25	100 104				
	26	Total liabilities. Add lines 17 through 25			85,023.	26	109,194.				
ŝ		Organizations that follow FASB ASC 958, c	heck her	e 🕨 🛣							
ů,		and complete lines 27, 28, 32, and 33.			004 1CE		1 0 2 0 4 0 0				
ala	27	Net assets without donor restrictions	<u>894,165.</u> 1,124,840.	27	1,020,498.						
В	28	Net assets with donor restrictions			1,124,840.	28	1,333,413.				
'n		Organizations that do not follow FASB ASC	; 958, ch	eck here 🕨 🛄							
Net Assets or Fund Balances		and complete lines 29 through 33.									
ets	29	Capital stock or trust principal, or current fund				29					
SSE	30	Paid-in or capital surplus, or land, building, or				30					
et A	31	Retained earnings, endowment, accumulated			2 010 005	31					
ž	32	Total net assets or fund balances		······ -	2,019,005. 2,104,028.	32	2,353,911. 2,463,105.				
	33	Total liabilities and net assets/fund balances			⊿,⊥∪4,∪∠0•	33	I 4,403,103.				

Form **990** (2020)

Form 990 (
Part X	Balance	Sheet

Form	1 990 (2020) America's Future Foundation	52-19	28321	Pag	ge 12
Pa	rt 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	1,753		
2	Total expenses (must equal Part IX, column (A), line 25)	. 2	1,418		
3	Revenue less expenses. Subtract line 2 from line 1	. 3			06.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	. 4	2,019	9,0	05.
5	Net unrealized gains (losses) on investments	. 5			
6	Donated services and use of facilities	. 6			
7	Investment expenses	. 7			
8	Prior period adjustments				
9	Other changes in net assets or fund balances (explain on Schedule O)	. 9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	. 10	2,353	3,9	11.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				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 in Sched				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or review	ved 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?		2 b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a sepa	rate 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				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on a				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the	Single Audit			
	Act and OMB Circular A-133?		3 a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the re				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits				<u> </u>

Form **990** (2020)

SCHEDULE A

(Form 990 or 990-EZ)

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							
	2020							
	Open to Public Inspection							
r	r identification number							

		of the Treasury nue Service		Open to Public Inspection								
Nam	ne of	the organizati		- GO to www.ii3.go	v/Form990 for instructi		ne latest i	mormation.	Employer	identification number		
Han		the organizati		ica's Futu	re Foundatic	m				2-1928321		
Pa	rt I	Reason			(All organizations must of		his nart) S	Soo instructio				
									113.			
	orgar	ganization is not a private foundation because it is: (For lines 1 through 12, check only one box.)										
1	님							1)(A)(I).				
2	H	 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 										
3	H	•						•				
4				ation operated in co	njunction with a hospita	I describe	d in sectio	on 170(b)(1)(4	A)(III). Enter	the hospital's name,		
_		city, and stat										
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)										
6					mental unit described in							
7	X				antial part of its support	from a gov	vernmenta	l unit or from	the general	public described in		
_				omplete Part II.)								
8	님				(1)(A)(vi). (Complete Par							
9					in section 170(b)(1)(A)							
			or a non-land-g	grant college of agric	culture (see instructions)	. Enter the	name, cit	y, and state o	of the collec	je or		
		university:										
10		Ũ		, ,	than 33 1/3% of its sup	•		,	• •	0		
					ct to certain exceptions;							
					e (less section 511 tax) fr	om busine	esses acqu	uired by the o	rganization	after June 30, 1975.		
				mplete Part III.)								
11	H	-	-	-	ively to test for public s	-						
12					ively for the benefit of, t							
				•	ed in section 509(a)(1) o					Check the box in		
	_				of supporting organization							
а					supervised, or controlled							
					egularly appoint or elect	a majority	of the dire	ctors or trust	ees of the s	supporting		
	_	-		complete Part IV, Se								
b					d or controlled in connec							
					anization vested in the s	same perso	ons that c	ontrol or man	age the sup	oported		
	_			t complete Part IV,								
С					g organization operated				ally integrat	ed with,		
	_	- ··	0		s). You must complete			-				
d		••	-		porting organization ope				•			
					zation generally must sa				nd an attent	tiveness		
	_	- ·	,	,	nplete Part IV, Section		,					
е			•		written determination fro			а Туре I, Туре	e II, Type III			
	_				onally integrated support	ing organi	zation.					
f		er the number		•								
g		vide the follow (i) Name of supp	-	n about the supporte (ii) EIN	ed organization(s).	(iv) Is the orga	anization listed	(v) Amount c	fmonotony	(vi) Amount of other		
		organizatior			(described on lines 1-10	in your govern	ing document?	support (see i	-	support (see instructions)		
		g	•		above (see instructions))	Yes	No					

Schedule A (Form 990 or 990-EZ) 2020 America's Future Foundation

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Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	867,483.	1,021,330.	964,202.	2,289,664.	1,713,447.	6,856,126.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	867,483.	1,021,330.	964,202.	2,289,664.	1,713,447.	6,856,126.
	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)						2,668,808.
6							4,187,318.
	Public support. Subtract line 5 from line 4.						4,107,510.
	ndar year (or fiscal year beginning in)	(a) 2016	(b) 0017	(a) 2019	(4) 2010	(a) 2020	
		(a)2016 867,483.	(b) 2017 1,021,330.	(c) 2018 964,202.	(d) 2019 2,289,664.	(e) 2020 1,713,447.	(f) Total 6,856,126.
	Amounts from line 4	007,403.	1,021,550.	J04,202.	2,209,004.	1,/13,44/.	0,000,120.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	1 702	292.	181.	190.	212.	F 660
_	and income from similar sources	4,793.	292.	101.	190.	212.	5,668.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	928.	7,309.	2,389.	322.	3,463.	
11	Total support. Add lines 7 through 10						6,876,205.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	265,123.
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3)	
	organization, check this box and stop						>
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2020 (line 6, column (f), d	livided by line 11,	column (f))		14	60.90 %
15	Public support percentage from 2019	Schedule A, Part	II, line 14			15	66.98 %
16a	33 1/3% support test - 2020. If the c	organization did no	t check the box o	n line 13, and line ⁻	14 is 33 1/3% or n	nore, check this bo	
	stop here. The organization qualifies	as a publicly supp	orted organization				X
b	33 1/3% support test - 2019. If the c	organization did no	t check a box on l	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	ifies as a publicly s	supported organization	ation			
17a	10% -facts-and-circumstances tes						
	and if the organization meets the fact						
	meets the facts-and-circumstances te	est. The organizatio	on qualifies as a pu	ublicly supported o	organization	-	
b	10% -facts-and-circumstances tes	•	• •		•		
	more, and if the organization meets th	-					
	organization meets the facts-and-circ						
18	-						s
_	18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions 🕨						

Schedule A (Form 990 or 990-EZ) 2020

Part II

Schedule A (Form 990 or 990-EZ) 2020 America's Future Foundation 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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included in 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.)						
14	First 5 years. If the Form 990 is for th	e organization's f	irst, second, third,	fourth, or fifth tax	vear as a section	501(c)(3) organiz	zation,
	check this box and stop here						
Sec	ction C. Computation of Publ	ic Support Pe	ercentage				
15	Public support percentage for 2020 (I	ine 8, column (f), (divided by line 13,	column (f))		15	%
16	Public support percentage from 2019	Schedule A, Part	t III, line 15			16	%
Sec	ction D. Computation of Invest	stment Incom	e Percentage				
	Investment income percentage for 20)	17	%
	Investment income percentage from		B			18	%
	33 1/3% support tests - 2020. If the					33 1/3% , and lin	e 17 is not
	more than 33 1/3%, check this box a						\blacktriangleright
b	33 1/3% support tests - 2019. If the						%, and
	line 18 is not more than 33 1/3%, che	•					
20	Private foundation. If the organizatio						
	23 01-25-21		· · · , · ·	. ,			990 or 990-EZ) 2020

16

Schedule A (Form 990 or 990 EZ) 2020 America's Future Foundation

Yes

No

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? *If* "*No*," *describe in* **Part VI** *how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If* "Yes," *answer lines 3b and 3c below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If* "Yes," *describe in* **Part VI** *when and how the organization made the determination.*
- **c** Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," *and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **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 in 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 in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If* "Yes," *provide detail in* **Part VI.**
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

1 2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a

10b

Schedule A (Form 990 or 990 EZ) 2020 America's Future Foundation Part IV Supporting Organizations (continued)

1

2

Yes

No

No

Yes No

	Yes	No
11a		
11b		
11c		
	11b	11a 11b

1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in</i> Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	
~		

Sec	tion C. Type II Supporting Organizations
	supervised, or controlled the supporting organization.
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in
2	Did the organization operate for the benefit of any supported organization other than the supported

Section 6. Type in Supporting Organizations						
			Yes			
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors					
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control					
	or management of the supporting organization was vested in the same persons that controlled or managed					

	the supported organization(s).	1		
Sec	tion 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			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

Section 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 yea(see instructions).
- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*
- c ____ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).
- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If* "Yes," *explain in* Part VI *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "*No*" provide details in **Part VI.**
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If* "Yes," *describe in* **Part VI** *the role played by the organization in this regard.*

2a

2b

За

3b

Schedule A (Form 990 or 990-EZ) 2020 America's Future Foundation Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in* **Part VI**). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (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		
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		
Sect	ion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ally integrate	d Type III supporting or	anization (see

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990 EZ) 2020 America's Future Foundation

Par	t v Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations _{(continu}	ed)		
Secti	ection D - Distributions Current Year					
_1	Amounts paid to supported organizations to accomplish exempt purposes					
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported				
	organizations, in excess of income from activity			2		
3	Administrative expenses paid to accomplish exempt purpos	es of supported organization	IS	3		
4	Amounts paid to acquire exempt-use assets			4		
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide 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 t	he organization is responsive	e			
	(provide details in Part VI). See instructions.			8		
9	Distributable amount for 2020 from Section C, line 6			9		
10	Line 8 amount divided by line 9 amount			10		
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2020	s	(iii) Distributable Amount for 2020	
1	Distributable amount for 2020 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2020 (reason-					
	able cause required - explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2020					
а	From 2015					
b	From 2016					
с	From 2017					
d	From 2018					
е	From 2019					
f	Total of lines 3a through 3e					
g	Applied to underdistributions of prior years					
h	Applied to 2020 distributable amount					
i	Carryover from 2015 not applied (see instructions)					
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2020 from Section D,					
	line 7: \$					
а	Applied to underdistributions of prior years					
b	Applied to 2020 distributable amount					
с	Remainder. Subtract lines 4a and 4b from line 4.					
5	Remaining underdistributions for years prior to 2020, if					
	any. Subtract lines 3g and 4a from line 2. For result greater					
	than zero, explain in Part VI. See instructions.					
6	Remaining underdistributions for 2020. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2021. Add lines 3j					
	and 4c.					
8	Breakdown of line 7:					
а	Excess from 2016					
b	Excess from 2017					
с	Excess from 2018					
d	Excess from 2019					
е	Excess from 2020					

Schedule A (Form 990 or 990-EZ) 2020

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Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Part II, Short Year Explanation:

The 2015 year is prepared for a short period of 7/1/2015 to 12/31/2015.

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

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

OMB No. 1545-0047

2020

Employer identification number

	30 1900001						
Organization type (check one):							
Filers of:	ilers of: Section:						
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						

America's Future Foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

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

Special Rules

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

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

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

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

Name of organization

Employer identification number

52-1928321

America's Future Foundation

Part I	Contributors (see instructions). Use duplicate copies of Part I if	rt I if additional space is needed.			
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution			
1		\$ 375,000. \$ Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution			
2		\$ 200,000. \$ 200,000. Person Payroll Noncash (Complete Part II for noncash contributions.)			
(a)	(b)	(c) (d) Total contributions Type of contribution			
<u>No.</u>	Name, address, and ZIP + 4	Sector contributions Type of contribution \$ 200,000. Person X (Complete Part II for noncash contributions.)			
(a)	(b)	(c) (d)			
<u>No.</u>	Name, address, and ZIP + 4	Total contributions Type of contribution			
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution			
5		* 150,000. * 150,000. Person Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution			
<u> </u>		Sector inductions Type of contribution * 80,000. * 80,000. (Complete Part II for noncash contributions.)			

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Name of organization

52-1928321

America's Future Foundation

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution				
7		\$75,000. (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution				
8		\$35,000. Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution				
		\$ Person Payroll S (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution				
		\$ (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution				
		\$				
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution				
		\$ Person Payroll (Complete Part II for noncash contributions.)				

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Name of organization

Page 3
Employer identification number

52-1928321

America's Future Foundation

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

artii	Noncash Flopenty (see instructions). Use duplicate copies of Part	. If it additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(-)		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		—	
		 \$	

Name of or	rganization			Employer identification number
Amerio	ca's Future Foundation			52-1928321
Part III		hthrough (e) and the following line en charitable, etc., contributions of \$1,000 or	try For organizations) that total more than \$1,000 for the year
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
Ī		(e) Transfer of gif	t	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of tr	ansferor to transferee
(a) No.				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
		(-) Transformed and		
	Transferee's name, address, a	(e) Transfer of gif nd ZIP + 4		ansferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
-		(e) Transfer of gif	 t	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of tr	ansferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
ŀ		(e) Transfer of gif	t	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of tr	ansferor to transferee

SCHEDULE	D
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Department of the Treasury

032051 12-01-20

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.



Employer identification number

52-1928321

Name of the organizati	on		
Internal Revenue Service			
Department of the freasury			

America's Future Foundation

Pa	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, li	ne 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 advisors in	writing that the assets held in donor advise	ed funds
	are the organization's property, subject to the organization's	s exclusive legal control?	YesNo
6	Did the organization inform all grantees, donors, and donor	advisors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose	conferring
Pa	t II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990, F	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (for example, recre		a historically important land area
	Protection of natural habitat	Preservation of	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	ified conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
a	Total number of conservation easements		
b	Total acreage restricted by conservation easements		
с	Number of conservation easements on a certified historic st		
d	Number of conservation easements included in (c) acquired		
•	listed in the National Register		
3	Number of conservation easements modified, transferred, re	eleased, extinguisned, or terminated by the	organization during the tax
4	year ► Number of states where property subject to conservation ea	accoment is located	
4 5	Does the organization have a written policy regarding the pe		
5	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting		
Ŭ		, nanding of violations, and emotoring cone	ervation casements during the year
7	Amount of expenses incurred in monitoring, inspecting, han	dling of violations, and enforcing conservat	ion easements during the year
-	▶ \$		
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requirements of section 170	h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservat		
	balance sheet, and include, if applicable, the text of the foot		
	organization's accounting for conservation easements.		
Pa	t III Organizations Maintaining Collections of	of Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" on Forr	n 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 9	58, not to report in its revenue statement a	nd balance sheet works
	of art, historical treasures, or other similar assets held for pu	Iblic exhibition, education, or research in fu	rtherance of public
	service, provide in Part XIII the text of the footnote to its final	ancial statements that describes these item	IS.
b	If the organization elected, as permitted under FASB ASC 9	58, to report in its revenue statement and t	balance sheet works of
	art, historical treasures, or other similar assets held for publi	c exhibition, education, or research in furth	erance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical tre		gain, provide
	the following amounts required to be reported under FASB	-	
	Revenue included on Form 990, Part VIII, line 1		
	Assets included in Form 990, Part X		
LHA	For Paperwork Reduction Act Notice, see the Instruction	ns for Form 990.	Schedule D (Form 990) 2020

Sche		's Future								1 Page 2
Par	t III Organizations Maintaining C	Collections of A	rt, Hist	torical Tr	easures, o	or Other	r Similar	Asse	ts (contir	nued)
3	Using the organization's acquisition, access	on, and other record	ds, checl	k any of the	following the	at make sig	gnificant us	se of its		
	collection items (check all that apply):									
а	Public exhibition	(hange progra					
b	Scholarly research e Other									
С	Preservation for future generations									
4	Provide a description of the organization's c	ollections and expla	in how th	ney further tl	he organizati	ion's exem	pt purpos	e in Par	t XIII.	
5	During the year, did the organization solicit of								-	
	to be sold to raise funds rather than to be m								Yes	No No
Par	t IV Escrow and Custodial Arran		ete if the	organizatio	n answered	"Yes" on F	orm 990, I	Part IV,	line 9, or	
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod								٦	<u> </u>
_	on Form 990, Part X?							L	Yes	└── No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing	table:						
									Amount	[
	Beginning balance									
	Additions during the year									
	Distributions during the year									
f	Ending balance								N	
	Did the organization include an amount on F						-		Yes	No
Par	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds. Complete it									
1 41			1					ra baak	(a) Four	vooro book
4	Designing of year balance	(a) Current year	(D) P	rior year	(c) Two yea		a) Three yea	ITS DACK	(e) roui	years Dack
	Beginning of year balance									
b										
	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
-	and programs									
	Administrative expenses									
-	End of year balance									
2	Provide the estimated percentage of the cur	rent year end balan	-	g, column (a	a)) held as:					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С		%								
	The percentages on lines 2a, 2b, and 2c sho									
3a	Are there endowment funds not in the posse	ession of the organiz	ation that	at are held a	nd administe	ered for the	e organizat	tion	г	
	by:									Yes No
	(i) Unrelated organizations								3a(i)	
	(ii) Related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organization								3b	
4	Describe in Part XIII the intended uses of the		owment	funds.						
Par	t VI Land, Buildings, and Equipm									
	Complete if the organization answere		,	,	1	, ,				
	Description of property	(a) Cost or o basis (invest		(b) Cost basis	or other (other)		cumulated reciation		(d) Bool	k value
4.0	Land		inerity	00313		uepi	Solation			
	Land									
	Buildings									
	Leasehold improvements				5,633.		3,92	3	· · ·	1,710.
	Equipment				5,055.		5,54	~-		±,/±0•
	Other			····· (D) // ··· · ·			•	-	· ·	1,710.
Iota	. Add lines 1a through 1e. (Column (d) must e	quai Form 990, Parl	. х, coiun	ин (в), Ilhe 1	UC.)					-, / - U•

Schedule D (Form 990) 2020

Part VII	Investments -	Other Securities.		
Schedule D	(Form 990) 2020	America's	Future	Foundation

Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		

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

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

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

Schedule D (Form 990) 2020

(b) Book value

(b) Book value

►

032053	12-01-20

(7) (8) (9)

(1)
(2)
(3)
(4)
(5)
(6)
(7)
(8)
(9)

Part X

(2)
(3)
(4)
(5)
(6)
(7)
(8)
(9)

1.

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶

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

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

(a) Description of liability

Other Liabilities.

(1) Federal income taxes

Part IX Other Assets.

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

Future Foundation	5
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Sche	edule D (Form 990) 2020 America's Future Foundation		1928321	Page 4	
Pa	rt XI Reconciliation of Revenue per Audited Financial Statements	With Revenue per R	eturn).	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements		1	1,753,	325.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	a			
b	Donated services and use of facilities 2	b			
с	Recoveries of prior year grants	c			
d	Other (Describe in Part XIII.)	d			
е	Add lines 2a through 2d		2e		0.
3	Subtract line 2e from line 1		3	1,753,	325.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	a			
b	Other (Describe in Part XIII.)	b			
с	Add lines 4a and 4b		4c		0.
_5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	1,753,	325.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements	s With Expenses per	Retu	rn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements		1	1,418,	419.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities2	a			
b	Prior year adjustments2	b			
С	Other losses2	c			
d	Other (Describe in Part XIII.)	d			
е	Add lines 2a through 2d		2e		0.
3	Subtract line 2e from line 1		3	1,418,	419.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	a			
b	Other (Describe in Part XIII.)	b			
с	Add lines 4a and 4b		4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	1,418,	419.
Da	rt XIII Supplemental Information.				

America's

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

Part X, Line 2:

The Organization is exempt from federal income tax under IRC Section
501(c)(3). In addition, the Organization qualifies as a charitable
organization as described in IRC Section 170(b)(1)(A) and has been
classified under IRC Section 509(a)(2) as an organization that is not a
private foundation. Management has evaluated the Organization's tax
positions and concluded that the financial statements do not include any
uncertain tax positions.

sc	HEDULE J	EJ Compensation Information		OMB No. 1545-0047			
(Fo	(Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest		-	2020			
•	Compensated Employees			2020)	
► Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ► Attach to Form 990.				Open to Public			
	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspection			
Nan	ne of the organizatio			identificati		mber	
		America's Future Foundation	52-1	192832	1		
Pa	rt I Question	s Regarding Compensation					
					Yes	No	
1a		ate box(es) if the organization provided any of the following to or for a person listed on Form	ı 990,				
		line 1a. Complete Part III to provide any relevant information regarding these items.					
	First-class or o	, i i i i i i i i i i i i i i i i i i i					
	Travel for com						
		ation and gross-up payments					
		spending account Personal services (such as maid, chauffe	ur, chet)				
h	If any of the bayes	on line to are aballed, did the arganization follow a written policy regarding payment or					
D	•	on line 1a are checked, did the organization follow a written policy regarding payment or provision of all of the expenses described above? If "No," complete Part III to explain		1b			
2		n require substantiation prior to reimbursing or allowing expenses incurred by all directors,					
2		rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2			
	trustees, and onice			2			
3	Indicate which if a	ny, of the following the organization used to establish the compensation of the organization?	9				
•	-	ector. Check all that apply. Do not check any boxes for methods used by a related organization					
		ation of the CEO/Executive Director, but explain in Part III.					
	X Compensation						
		compensation consultant					
		ther organizations Approval by the board or compensation of	committee				
4	During the year, did	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing					
	organization or a re	lated organization:					
а	Receive a severand	e payment or change-of-control payment?		4a		X	
b	Participate in or rec	eive payment from a supplemental nonqualified retirement plan?		4b		X	
с	Participate in or rec	eive payment from an equity-based compensation arrangement?		4c		Х	
	If "Yes" to any of li	nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.					
		:)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.					
5	-	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on				
	contingent on the r					37	
a						X	
b		ation?		5b		X	
-		or 5b, describe in Part III.					
6		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on				
-	contingent on the r			0-		x	
a k						X	
a		ation?		6b			
7		or 6b, describe in Part III. on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payment	e				
'	-	nes 5 and 6? If "Yes," describe in Part III		7		x	
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to					
0		ported on Form 990, Part VII, paid of accrued pursuant to a contract that was subject to		8		x	
9		id the organization also follow the rebuttable presumption procedure described in					
5		a 53.4958-6(c)?		9			
LHA		eduction Act Notice, see the Instructions for Form 990.		dule J (Forr	n 990	2020	
		·····, ···· ··························					

52-1928321

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denents	(B)(i)-(D)	reported as deferred on prior Form 990
(1) Claire Kittle Dixon	(i)	157,784.	0.	0.		1,873.		0.
Executive Director, Talent Market	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Schedule J (Form 990) 2020

SCHEDULE O (Form 990 or 990-EZ)

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



52-1928321

Form 990, Part III, Line 2, New Program Services:

The Organization acquired a program called Talent Market Program from

Donor Trust during 2020. The program provides search and talent

America's Future Foundation

placement services free of charge to nonprofit organizations that share

our mission. By promoting open positions, managing the initial search

and providing guidance to nonprofits they help simplify the hiring

process for hundreds of nonprofits around the country.

Form 990, Part VI, Section B, line 11b:

The Board of Directors will review a draft of the form 990 prior to filing with the IRS.

Form 990, Part VI, Section B, Line 12c:

Each year the Board is required to provide an annual disclosure of

interests that could give rise to conflicts. This listing is reviewed, and

Board members are required to abstain from voting on matters where a

conflict may exist.

Form 990, Part VI, Section C, Line 19:

Governing documents are available upon request.

Form 990, Part IX, Line 11g, Other Fees:

Consulting:

Program service expenses

Management and general expenses

Fundraising expenses

11,654.

110,549.

4,892.

Schedule O (Form 990 or 990-EZ) 2020

Schedule O (Form 990 or 990-EZ) 2020 Name of the organization America's Future Foundation	Employer identification number 52-1928321
	•
Total expenses	127,095.
Contractors:	
Program service expenses	0.
Management and general expenses	3,727.
Fundraising expenses	3,000.
Total expenses	6,727.
Photography:	
Program service expenses	2,736.
Management and general expenses	121.
Fundraising expenses	288.
Total expenses	3,145.
Other:	
Program service expenses	8,611.
Management and general expenses	381.
Fundraising expenses	908.
Total expenses	9,900.
Total Other Fees on Form 990, Part IX, line 11g, Col A	146,867.
Form 990, Part XII, Line 2c:	
The organization's Board of Directors is responsible for	oversight of
the audit, including selection of the independent account	ant. The
process has not changed from previous years.	