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Extended to November 15, 2022

Form **990** 

Department of the Treasury Internal Revenue Service

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.



AF	or the	and and a 2021 calendar year, or tax year beginning	ending				
B Ci	heck if	e: C Name of organization		D Employer identific	ation number		
	Addres	America's Future Foundation					
	Name chang	Doing business as	No. STR. R.	52-192832	21		
	return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number			
	Final		300	(202) 331			
_	termin ated	City or town, state or province, country, and ZIP or foreign postal code	28 . TRA	G Gross receipts \$	2,125,340.		
	Amen	washington, DC 20009	The segment	H(a) Is this a group rei			
L	Applic tion pendir			for subordinates? Yes X No			
		same as C above		H(b) Are all subordinates inc	ubordinates included? Yes No		
		empt status: X 501(c)(3) 501(c) ( )◀ (insert no.) 4947(a)(1)	or 527	If "No," attach a l	ist. See instructions		
		te:▶ www.americasfuture.org	14/2 50360	H(c) Group exemption			
		organization: X Corporation Trust Association Other	L Year	of formation: 1995 M	State of legal domicile: DC		
Pa	and the second se	Summary	Call Section (	y was to take state			
	1	Briefly describe the organization's mission or most significant activities: The	missic	n of America	a's Future		
aŭ		Foundation is to develop lifelong effect					
ern	2	Check this box 🕨 🛄 if the organization discontinued its operations or dispo	osed of more	than 25% of its net as:	sets. 8		
ò				3			
~		Number of independent voting members of the governing body (Part VI, line 1b)			8		
ies		Total number of individuals employed in calendar year 2021 (Part V, line 2a)			15		
Activities & Governance	6	Total number of volunteers (estimate if necessary)			100		
Act		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	<u>.</u>		0.		
			-	Prior Year	Current Year		
en		Contributions and grants (Part VIII, line 1h)		1,713,447.	2,074,640.		
Revenue		Program service revenue (Part VIII, line 2g)		36,203.	41,830.		
Re		Investment income (Part VIII, column (A), lines 3, 4, and 7d)			157.		
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,463. 1,753,325.	-31,223.		
-		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,755,525.	2,085,404.		
1		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.		
	a second	Benefits paid to or for members (Part IX, column (A), line 4)		950,287.	1,009,640.		
Expenses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		950,207.	1,009,640.		
en		Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25)	96	0.	0.		
Ä				468,132.	649,055.		
-		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,418,419.	1,658,695.		
	A	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		334,906.	426,709.		
- 50	19	Revenue less expenses. Subtract line 18 from line 12		ginning of Current Year			
Net Assets or Fund Balances				2,463,105.	End of Year 2,838,924.		
Bala		Total assets (Part X, line 16)		109,194.	58,304.		
et A		Total liabilities (Part X, line 26)		2,353,911.	2,780,620.		
-		Net assets or fund balances. Subtract line 21 from line 20		4,555,511.	2,700,020.		
	The Destroy	Signature block	ac and states	ente and to the bact of m	knowledge and belief it is		

Under penalties of perjury, I declare that I have examin his return, including accompanying schedules and statements, and to the best of my ki true, correct, and complete. Declaration of groparor (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of efficer <u>Cindy Cerquitella</u> , Executive Director Type or print name and litle	Date 8/30 /2022.
Paid	Print/Type preparer's name Jie Chen, CPA	Date Check PTIN 8/30/22 # Bettemployed P01049760
Preparer	Firm's name Rogers & Company PLZC	Firm's EIN 58-2676261
Use Only	Firm's address 8300 Boone Boulevard, Suite 600 Vienna, VA 22182	Phone no. (703) 893-0300
May the II	RS discuss this return with the preparer shown above? See instructions	X Yes No
and the second se	1 HA For Paperwork Beduction Act Notice, see the separate instructions.	Form <b>990</b> (2021)

Form	America's Future Foundation	52-1928323	1 Page <b>2</b>
Par	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission:		
	The mission of America's Future Foundation is to identi	fy and deve	elop
	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		
	prior Form 990 or 990-EZ?	Y	'es I No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Y	es X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	ers, the total expense	es, and
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 819,996. including grants of \$) (Reven	ue\$4	1,830. <sub>)</sub>
	Networking, educational, and professional development p	rograms to	
	identify and develop young professional leaders for lib	erty inclu	de
	seminars, roundtables, debates, gala, networking lunche	s, and the	
	leading blog on professional development issues for the		
	movement. Chapters throughout the country host networki	ng programs	5,
	guest speakers, panel discussions, and debates.		
4b	(Code: ) (Expenses \$ 501,550 · including grants of \$ ) (Reven	ue \$	)
	Talent Market - Talent Market provides search and talen	t placement	C
	services free of charge to nonprofit organizations that		
	mission. By promoting open positions, managing the init		
	providing guidance to nonprofits they help simplify the for hundreds of nonprofits around the country.	niring pro	ocess
	tor numbreds of nonprofiles around the country.		
4c			)
40	(Code:) (Expenses \$ including grants of \$) (Reven	ue \$	)
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$	١	
4e	Total program service expenses 1, 321, 546.	/	
		For	m <b>990</b> (2021)

Form	990	(2021)

Form 990 (2021)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? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			v
	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			x
-	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		x
6	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If</i> "Yes," <i>complete Schedule D, Part I</i>	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	0		
'	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	-		
U	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	-		
-	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	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			
	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		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	х	
122	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	111		
IZa	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	. <u>_u</u>		<u> </u>
~	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	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			
	foreign organization? If "Yes," 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			
	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,			v
40	column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> . See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			x
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10		x
20-	complete Schedule G, Part III	19 20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	-00		<u> </u>
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x

 Form 990 (2021)
 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			
	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			
	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		
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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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%			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			
		07		x
00	entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		- 23
28	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
a	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?/f	200		
•	"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		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		х
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			
	Part V, line 1	34		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	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 on Schedule O for Part VI, lines 11b and 19?		37	
Der	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			
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 34		Yes	No
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable <b>1b</b> 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1-	х	
	(gambling) winnings to prize winners?	1c	47	

Form 990	(2021)
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 15			
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			v
	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).	-		x
	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		
C Go	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
юа	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	6.		x
h	any contributions that were not tax deductible as charitable contributions?	6a		- 23
D	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	00		
'a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		x
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	15		
Ŭ	to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
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		X
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			
40-	amounts due or received from them.)	40-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
u	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	iou		
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans 13b			
с	Enter the amount of reserves on hand 13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	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		X
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes." complete Form 6069.			

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Form 990 (	
Part VI	Gov

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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.

1a       Enter the number of voting members of the governing body, or if the governing body.       2         3       Did the organization nave members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?       2         4       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         7a       Did the organization have members, stockholders, or organization satisficant 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:       7b         9       Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses on Schedule O       9 <th>Yes</th> <th>No X X X X X X X</th>	Yes	No X X X X X X X
1a       Enter the number of voting members of the governing body, or if the governing body.       2         3       Did the organization nave members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?       2         4       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         7a       Did the organization have members, stockholders, or organization satisficant 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:       7b         9       Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses on Schedule O       9 <th>x</th> <th>X X X X X X</th>	x	X X X X X X
If there are material differences in voting rights among members of the governing body, or if the governing body delegated bread authority to an executive committee or similar committee, explain on Schedule 0.       Ib         Description       Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustees, or key employees to a management duties customarily performed by or under the direct supervision of officers, director, trustees, or key employees to a management company or other person?       2         3       Did any officer, director, trustees, or key employees to a 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         4       Did the organization baceme aware during the year of a significant diversion of the organization's assets?       5         5       Did the organization have members or 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:       7a         a       The governing body?       8a       8a         b       Each committee with authority to act on behalf of the governing body?       8a		X X X X
body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.       to		X X X X
b       Enter the number of voting members included on line 1a, above, who are independent       1b       8         2       Did any 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         4       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         4       Did the organization become aware during the year of a significant diversion of the organization's assets?       5         6       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 commergonaeously document the meetings held or written actions undertaken during the year by the following:       7a         7       Bi there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O       9         9       Is there any officer, director, trustee, or key employee listed in		X X X X
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 employees?       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         4       Did the organization baces control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management of the organization's assets?       6         5       Did the organization have members or 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         b       Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:       7a         a       The governing body?       8a         b       Each committee with authority to act on behalf of the governing body?       8a         b       Is the any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization have mether set with approve the names and addresses on Schedule O       9         Section B. Policies (This Section B requests information about policies not required by the		X X X X
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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:       7a         7b       Each committee with authority to act on behalf of the governing body?       8a         9       Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O       9         9       Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)       10a         10a       Did the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?       10a         11a       Has the organization required by the organization required by the secribe on Schedule O the process, if any, used by the organization review this Form 990.       12a         12a       Did the organization have a written conflict of interest policy? If "No," go to line 13       12a         12b       Were officers, directors, or trustees, and key employee		Х
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8       Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:       a         a       The governing body?       Ba         b       Each committee with authority to act on behalf of the governing body?       Bb         9       Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the 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.)         10a         Id the organization have local chapters, branches, or affiliates?       10a         b       If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?       10b         11       Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?       11a         2       Did the organization nave a written conflict of interest policy? If "No," go to line 13       12a         b       Use the organization regulary and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done       12c         13       Did the organization have a written whistleblower policy?       13 <t< th=""><th></th><th>37</th></t<>		37
a The governing body?       8a         b Each committee with authority to act on behalf of the governing body?       8b         9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the 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.)       Y         10a Did the organization have local chapters, branches, or affiliates?       10a         b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?       10b         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 on Schedule O the process, if any, used by the organization to review this Form 990.       12a         12a Did the organization negularly and consistently monitor and enforce compliance with the policy? If "No," go to line 13       12a         b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?       12b         13 Did the organization have a written whistleblower policy?       13         14 Did the organization have a written document retention and destruction policy?       14         15 Did the process for determining compensation of the		X
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9       Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the 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.)       Y         10a       Did the organization have local chapters, branches, or affiliates?       Y         b       If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?       10a         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 on Schedule O the process, if any, used by the organization to review this Form 990.       12a         12a       Did the organization neve a written conflict of interest policy? If "No," go to line 13       12a         b       Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?       12b         13       Did the organization have a written whistleblower policy?       13         14       Did the organization have a written document retention and destruction policy?       14         15       Did the organization have a written document retention and destruction policy?       14         1	A	
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10a       Did the organization have local chapters, branches, or affiliates?       10a         b       If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?       10b         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 on Schedule O the process, if any, used by the organization to review this Form 990.       11a         12a       Did the organization have a written conflict of interest policy? If "No," go to line 13       12a         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 have a written whistleblower policy?       13         14       Did the organization have a written document retention and destruction policy?       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?       15a         b       Other officers or key employees of the organization       15b		X
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<ul> <li>b Describe on Schedule O the process, if any, used by the organization to review this Form 990.</li> <li>12a Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i></li> <li>b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?</li> <li>c Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe on Schedule O how this was done</i></li> <li>13 Did the organization have a written whistleblower policy?</li> <li>14 Did the organization have a written document retention and destruction policy?</li> <li>14</li> <li>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?</li> <li>a The organization's CEO, Executive Director, or top management official</li> <li>b Other officers or key employees of the organization</li> </ul>	X	
12a       Did the organization have a written conflict of interest policy? If "No," go to line 13       12a         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 on Schedule O how this was done       12c         13       Did the organization have a written whistleblower policy?       13         14       Did the organization have a written document retention and destruction policy?       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?       15a         a       The organization's CEO, Executive Director, or top management official       15a         b       Other officers or key employees of the organization       15b		
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c       Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	x	
on Schedule O how this was done       12c         13       Did the organization have a written whistleblower policy?       13         14       Did the organization have a written document retention and destruction policy?       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?       15a         a       The organization's CEO, Executive Director, or top management official       15a         b       Other officers or key employees of the organization       15b		
13       Did the organization have a written whistleblower policy?       13         14       Did the organization have a written document retention and destruction policy?       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?       15a         a       The organization's CEO, Executive Director, or top management official       15a         b       Other officers or key employees of the organization       15b	x	
14       Did the organization have a written document retention and destruction policy?       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?       14         a       The organization's CEO, Executive Director, or top management official       15a         b       Other officers or key employees of the organization       15b	x	
15       Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?       15         a       The organization's CEO, Executive Director, or top management official       15a         b       Other officers or key employees of the organization       15b	X	
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a The organization's CEO, Executive Director, or top management official       15a         b Other officers or key employees of the organization       15b		
b Other officers or key employees of the organization 15b		Х
		Х
If "Yes" to line 15a or 15b, describe the process on 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		Х
<b>b</b> If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation		
in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's		
exempt status with respect to such arrangements? 16b		
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 Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) a	availa	ble
for public inspection. Indicate how you made these available. Check all that apply.		
Own website Another's website X Upon request Other (explain on Schedule O)		
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and finance		
statements available to the public during the tax year.	cial	
20 State the name, address, and telephone number of the person who possesses the organization's books and records ► Cindy Cerquitella - (202) 331-2261	cial	
1633 Connecticut Ave. NW, 300, Washington, DC 20009	cial	

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated
	Employees, and Independent Contractors

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	(C)						(D)	(E)	(F)
Name and title	Average hours per week	box offi	not c , unle cer an	ss pe	more rson	than is bot	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Offlicer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) Claire Kittle Dixon Executive Director, Talent Market	40.00					x		157,452.	0.	17,764.
(2) Cindy Cerquitella	40.00								•••	
Executive Director				x				157,500.	Ο.	7,262.
(3) Richard Lorenc	0.50									
Chairman		Х		Х				0.	0.	0.
(4) Kathleen O'Hearn	0.50								_	_
Vice Chair		Х		Х				0.	0.	0.
(5) John Tillman	0.50								0	0
Secretary		X		X				0.	0.	0.
(6) Peter Lipsett	0.50							0	0	0
Director	0.50	X						0.	0.	0.
(7) Chaz Cirame	0.50	x		x				0.	0.	0.
Treasurer (8) Beverly Hallberg	0.50							0.	0.	0.
Director	0.50	x						0.	0.	0.
(9) Jeff Berkowitz	0.50									
Director		x						0.	0.	0.
(10) Romina Boccia	0.50									
Director		x						0.	0.	0.
		-								
		-								
										Earm <b>990</b> (2021)

Form 990 (2021)

Form 990 (2021) America'									52-19	928	321	Pa	age <b>8</b>
Part VII Section A. Officers, Directors, Trus	stees, Key Em	ploy	vees	, an	d Hi	ghe	st C	Compensated Employe	es (continued)				
(A) Name and title	<b>(B)</b> Average hours per week	ours per box,				than o is both pr/trus	n an	(D) Reportable compensation from	<b>(E)</b> Reportable compensatio from related	n	n (F Estim amou oth		
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organization: (W-2/1099-MIS 1099-NEC)	s SC/	comp fro orga and	pensa om the anizati d relate nizatio	e ion ed
								214.052				- 0	26
1b Subtotal c Total from continuation sheets to Part V d Total (add lines 1b and 1c)	II, Section A							314,952. 0. 314,952.		0. 0. 0.		5,0 5,0	0.
2 Total number of individuals (including but in compensation from the organization ►									),000 of reportab	le		<u>v</u> [	2
<b>3</b> Did the organization list any <b>former</b> officer line 1a? <i>If</i> "Yes," <i>complete Schedule J for</i> s			•		•	-		phest compensated emp	•		3	Yes	No X
4 For any individual listed on line 1a, is the s and related organizations greater than \$15	0,000? If "Yes,	le co " co	ompe mple	ensa ete S	atior Sche	n anc edule	l ot 9 <i>J i</i>	her compensation from for such individual	the organization		4	x	
5 Did any person listed on line 1a receive or rendered to the organization? If "Yes," con	-				-			-			5		х
Section B. Independent Contractors									•···· ·				
Complete this table for your five highest complexity the organization. Report compensation for								n the organization's tax		ipens	ation fr		
(A) Name and business address NONE Descripti						(B) Description of s	services	С	omper		n		
							_						
2 Total number of independent contractors (	including but r	not li	mite	d to	tho	se lis	ster	d above) who received n	nore than				
\$100,000 of compensation from the organ	•			0		0							

						ut	ure Foun	dation		52-1928	321 F	Page <b>9</b>
Pa	rt V	/111	Statement of Re									
			Check if Schedule O	conta	ains a respo	nse	or note to any lir	ne in this Part VIII		( <b>A</b> )		
								(A) Total revenue	(B) Related or exempt function revenue	Unrelated	(D) Revenue exc from tax u sections 512	nder
S S	4	-	Federated campaigns		1a						000110110 0 12	. 011
Contributions, Gifts, Grants and Other Similar Amounts	· ·		Membership dues									
ي ق												
ifts r A			Fundraising events Related organizations									
nila nila			Government grants (contr									
Sir			All other contributions, gifts,									
her		'	similar amounts not included			2	074,640.					
ĢĘ		~	Noncash contributions included in				0/1/0100					
		-	Total. Add lines 1a-1f				<b>&gt;</b>	2,074,640.				
<u> </u>							Business Code					
Ø	2	2	Event				900099	34,271.	34,271.			
vic	2		Membership du	Ies			900099	7,559				
Ser		c					500055	,,,,,,,	1,000			
že u		d										
Program Service Revenue		e										
Pro		-	All other program service	rovor								
			Total. Add lines 2a-2f					41,830.	•			
	3		Investment income (includ					,				
	Ŭ		other similar amounts)	•			•	157.	,		1	57.
	4		Income from investment of									
	5		Royalties		-	-						
	-				(i) Real		(ii) Personal					
	6	а	Gross rents	6a								
	_		Less: rental expenses	6b	39,93							
			Rental income or (loss)		-32,63	6.						
			Net rental income or (loss)	, —			<b>&gt;</b>	-32,636.	,		-32,6	36.
	7		Gross amount from sales of	Í	(i) Securiti		(ii) Other					
			assets other than inventory	7a								
		b	Less: cost or other basis									
ne			and sales expenses	7b								
venue		с	Gain or (loss)	7c								
Re		d	Net gain or (loss)				►					
Other Re	8	а	Gross income from fundraisin	ng eve	ents (not							
ð			including \$		of							
			contributions reported on									
			Part IV, line 18			8a						
		b	Less: direct expenses			8b						
			Net income or (loss) from		-		🕨					
	9	а	Gross income from gamin	0								
			Part IV, line 19			9a						
			Less: direct expenses			9b						
			Net income or (loss) from	-	-	3 <u></u>	····· <b>&gt;</b>					
	10	а	Gross sales of inventory, I									
			and allowances			10a						
			Less: cost of goods sold			10b						
		С	Net income or (loss) from	sales	s of inventor	у						
sn			Other income				Business Code 900099	1,413.			1 /	13.
Miscellaneous Revenue	11		orner micome				500059	, <u>+</u> ,	'		<u>, 4</u>	т <b>)</b> •
ella. Ven		b										
Be		c d										
Σ			All other revenue Total. Add lines 11a-11d				└ <b>──</b>	1,413.				
	12		Total revenue. See instruction					2,085,404	41,830.	0.	-31,0	66.
	12						····· 🚩	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,0000	<b>~ •</b>		

132009 12-09-21

# Form 990 (2021)

J U G	2021	)		- L L
VII		Statement	of	P

 Form 990 (2021)
 America's Future Foundation
 52

 Part IX
 Statement of Functional Expenses

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

_	Check if Schedule O contains a respon				X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations 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,				
	trustees, and key employees	164,762.	128,417.	18,258.	18,087.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	666,117.	521,785.	67,997.	76,335.
8	Pension plan accruals and contributions (include		11 400	4 0 4 1	0.5
	section 401(k) and 403(b) employer contributions)	16,450.	11,423.	4,941.	86. 523.
9	Other employee benefits	99,435.	69,046.	29,866.	
10	Payroll taxes	62,876.	48,393.	7,196.	7,287.
11	Fees for services (nonemployees):				
а		1 010			1 010
b	F	1,212.			1,212.
	Accounting	35,531.		35,531.	
d	Lobbying				
e					
f	Investment management fees				
g		192,588.	170,438.		22 150
	column (A), amount, list line 11g expenses on Sch 0.)	74,808.	66,204.		22,150. 8,604.
12	Advertising and promotion	47,855.	30,267.	9,873.	7,715.
13	Office expenses	11,007.	9,741.	9,073.	1,266.
14	Information technology	11,007.	9,141.		1,200.
15	Royalties	7,088.	2,235.	4,853.	
16	Occupancy	180,368.	173,157.	2,501.	4,710.
17	Travel	100,500.	±/3,±3/•	2,301.	4,710
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	86,648.	86,100.	292.	256.
19 20	Conferences, conventions, and meetings	00,010.		• • • •	200
20 21	Interest Payments to affiliates				
21	Depreciation, depletion, and amortization	906.		906.	
22 23		6,559.	2,475.	3,091.	993.
23 24	Other expenses. Itemize expenses not covered	.,	_,		5551
-7	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	<u> </u>	4,485.	1,865.	2,348.	272
b		,	,	,	
c					
d					
e	All other expenses				
25 25	Total functional expenses. Add lines 1 through 24e	1,658,695.	1,321,546.	187,653.	149,496.
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				

America'	s Future	Foundatior	ſ
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52-1928321 Page 11

		Check if Schedule O contains a response or no	te to any	line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			1,973,654.	1	2,112,312.
	2	Savings and temporary cash investments		331,117.	2	564,144.	
	3	Pledges and grants receivable, net	141,486.	3	143,429.		
	4	Accounts receivable, net			4		
	5	Loans and other receivables from any current o					
		trustee, key employee, creator or founder, subs	tantial c	ontributor, or 35%			
		controlled entity or family member of any of the	se perso	ons		5	
	6	Loans and other receivables from other disqual					
		under section 4958(f)(1)), and persons describe	d in sec <sup>.</sup>	tion 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net		[		7	
Assets	8	Inventories for sale or use				8	
Ä	9	Prepaid expenses and deferred charges			7,938.	9	8,230.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	8,438.			
	b	Less: accumulated depreciation		4,829.	1,710.	10c	3,609.
	11	Investments - publicly traded securities			11		
	12	Investments - other securities. See Part IV, line			12		
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			7,200.	15	7,200.
	16	Total assets. Add lines 1 through 15 (must equ			2,463,105.	16	2,838,924.
	17	Accounts payable and accrued expenses			109,194.	17	58,304.
	18	Grants payable			18		
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete				21	
S	22	Loans and other payables to any current or forr	ner offic	er, director,			
Liabilities		trustee, key employee, creator or founder, subs	tantial c	ontributor, or 35%			
iabi		controlled entity or family member of any of the	se perso	ons		22	
	23	Secured mortgages and notes payable to unrel	ated thir	d parties		23	
	24	Unsecured notes and loans payable to unrelate	d third p	arties		24	
	25	Other liabilities (including federal income tax, pa	yables t	o related third			
		parties, and other liabilities not included on line	s 17-24).	Complete Part X			
		of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			109,194.	26	58,304.
(0		Organizations that follow FASB ASC 958, che	eck here				
Cei		and complete lines 27, 28, 32, and 33.					
alan	27	Net assets without donor restrictions			1,020,498.	27	1,140,164.
Ä	28	Net assets with donor restrictions		<u></u>	1,333,413.	28	1,640,456.
oun		Organizations that do not follow FASB ASC 9	958, che	ck here 🕨 🛄			
Ē		and complete lines 29 through 33.					
tso	29	Capital stock or trust principal, or current funds				29	
3Se	30	Paid-in or capital surplus, or land, building, or ea	quipmen	t fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated in				31	
Ne	32	Total net assets or fund balances			2,353,911.	32	2,780,620.
	33	Total liabilities and net assets/fund balances			2,463,105.	33	2,838,924.

Form **990** (2021)

Form 990 (2021) Au Part X Balance Sheet

Form	990 (2021) America's Future Foundation	52-192	28321	Pag	ge <b>12</b>
Par	t 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	2,085		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,658		
3	Revenue less expenses. Subtract line 2 from line 1	3			09.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,353	3,9	11.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	2,780	),6	20.
Par	t 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 on Schedule	Ο.			
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 reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		. 2b	х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		. 2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		. 3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits				

Form **990** (2021)

Department of the Treasury

Internal Revenue Service

(Form 990)

# Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

	OMB No. 1545-0047
	2021
	Open to Public Inspection
Employer	identification number

Name	of the	organization	
			-

				re Foundatio					2-1928321	
Pa	rt I	Reason for Public (	Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instruction	ıs.		
The	organ	ization is not a private found								
1		A church, convention of ch								
2		A school described in <b>section 170(b)(1)(A)(ii).</b> (Attach Schedule E (Form 990).)								
3		A hospital or a cooperative				(b)(1)(A)(i	ii).			
4	$\square$	A medical research organiz						)(iii). Enter	the hospital's name.	
		city, and state:		· · · · · · · · · · · · · · · · · · ·				<b>N)</b>	···- ·· [- · · · · · · · · · · · · · ·	
5		An organization operated for	or the benefit of a co	llege or university owned	d or operat	ted by a d	overnmental i	unit descrit	ped in	
·		section 170(b)(1)(A)(iv). (C			a er epera					
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).								
7	X							he general	nublic described in	
'		An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)								
8		A community trust describe		(1)(A)(vi) (Complete Par	F 11 \					
9	H	An agricultural research org				nd in coniu	unction with a	land grant	collogo	
3		or university or a non-land-				-		-	-	
		university:	grant college of agric			name, cit	y, and state o			
10		An organization that norma	Illy reacives (1) more	than 22 1/20/ of its our	port from	oontributic	na mombora	hin food a	nd groop receipte from	
10										
		activities related to its exen		-					-	
		income and unrelated busin		(less section 511 tax) in	om busine	sses acqu	lired by the of	gamzation	alter Julie 30, 1975.	
44		See section 509(a)(2). (Con	,	ively to test for public or	faty Cas	nantian Fl	O(a)(4)			
11 12	H	An organization organized a	-	•	•			orm (out the	nurnance of one or	
12		An organization organized a	-	-	-			•		
		more publicly supported or	-							
_		lines 12a through 12d that				-		-	, aivina	
а		<b>Type I.</b> A supporting orga		-	•					
		the supported organization			a majority (	or the dire		es or the s	supporting	
h		organization. You must o	-		tion with it		ad arganizatio	n(a) by be	wing	
b		<b>Type II.</b> A supporting org	-				-		-	
		control or management o			ame perso	ons that co	ontroi or mana	age the sup	poned	
~		organization(s). You mus <b>Type III functionally inte</b>			in connoc	tion with	and functions	lly intograt	od with	
C		its supported organization						illy illicylat	eu with,	
d		Type III non-functionally						rtod organi	ization(c)	
u	L	that is not functionally int		•••				-		
		requirement (see instruct			•		-	u an allem		
е		Check this box if the orga		•						
Ŭ		functionally integrated, or					, iype i, iype	n, rype m		
f	Ente	er the number of supported of	•••		ing organi	Lation				
		vide the following information	•	ed organization(s).					·	
		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed	(v) Amount of	monetary	(vi) Amount of other	
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	nstructions)	support (see instructions)	
_										
Tota	al								1	

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

fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1,021,330.	964,202.	2,289,664.	1,713,447.	2,074,640.	8,063,283.
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	1,021,330.	964,202.	2,289,664.	1,713,447.	2,074,640.	8,063,283.
5	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)						3,884,190.
6	Public support. Subtract line 5 from line 4.						4,179,093.
	ction B. Total Support						i
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4	1,021,330.	964,202.	2,289,664.	1,713,447.	2,074,640.	8,063,283.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	292.	181.	190.	212.	7,457.	8,332.
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.)	7,309.	2,389.	322.	3,463.	1,413.	14,896.
11	Total support. Add lines 7 through 10		,		•	,	8,086,511.
	Gross receipts from related activities,	etc. (see instruction	ons)			12	253,935.
	First 5 years. If the Form 990 is for th						
	organization, check this box and <b>stop</b>						
Se	ction C. Computation of Publ		rcentage				
	Public support percentage for 2021 (I			column (f))		14	51.68 %
	Public support percentage from 2020		•			15	60.90 %
	<b>33 1/3% support test - 2021.</b> If the c					nore, check this bo	
	stop here. The organization qualifies						
b	<b>33 1/3% support test - 2020.</b> If the c						
	and <b>stop here.</b> The organization quali	-					
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact						
	meets the facts-and-circumstances te			-	-		
Ł	10% -facts-and-circumstances test	-					
~	more, and if the organization meets th	-					
	organization meets the facts-and-circu						
18	Private foundation. If the organizatio		-				
				a, 100, 170, 01 170			Eorm 000) 2021

Schedule A (Form 990) 2021

## Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to

qualify under the tests listed below, please complete Part II.) Section A. Public Support

Sei	Stion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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						
Ŭ	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						
t	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.)						
See	ction B. Total Support				-		
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6						
10 <i>a</i>	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 on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is for th	ne organization's fi	rst, second, third.	fourth, or fifth tax	year as a section	501(c)(3) organiza	ation,
	check this box and <b>stop here</b>	•			•		
See	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2021 (	line 8, column (f), c	divided by line 13,	column (f))		15	%
16	Public support percentage from 2020	) Schedule A, Part	III, line 15			16	%
See	ction D. Computation of Investion	stment Incom	e Percentage				
17	Investment income percentage for 20	<b>)21</b> (line 10c, colur	mn (f), divided by li	ne 13, column (f))		17	%
18	Investment income percentage from	2020 Schedule A,	Part III, line 17			18	%
19a	<b>33 1/3% support tests - 2021.</b> If the					33 1/3% , and line	e 17 is not
	more than 33 1/3%, check this box a						
b	33 1/3% support tests - 2020. If the						, and
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						
	23 01-04-22						A (Form 990) 2021

## 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.)

America's Future Foundation

## Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? *If* "*No*," *describe in* **Part VI** *how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If* "Yes," answer *lines 3b and 3c below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If* "Yes," *describe in* **Part VI** *when and how the organization made the determination.*
- **c** Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," *and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "Yes," *provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "*Yes*," *provide detail in* **Part VI.**
- **c** Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If* "*Yes*," *provide detail in* **Part VI.**
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.* 
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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

Sche	hedule A (Form 990) 2021 America's Future Foundation	52-1928	321	l <sub>Pa</sub>	age <b>5</b>
Pa	art IV Supporting Organizations (continued)				
				Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?				
а	a A person who directly or indirectly controls, either alone or together with persons described	on lines 11b and			
	11c below, the governing body of a supported organization?	11	a		
b	<b>b</b> A family member of a person described on line 11a above?	11	b		
с	c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a,	11b, or 11c, provide			
	detail in Part VI.	11	c		

## Section B. Type I Supporting Organizations

Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or 1 more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in 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. 1

America's Future Foundation

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

## Section C. Type II 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

## Section D. All Type III Supporting Organizations

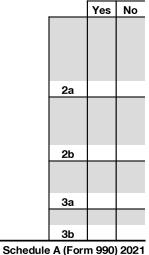
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently 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 on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

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

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions). 1
- а The organization satisfied the Activities Test. Complete line 2 below.
- The organization is the parent of each of its supported organizations. Complete line 3 below. b
- The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions) С

18

- 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 on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 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.



52-1928321 Daga 5

Yes

2

No

No

Section 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		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors			
(explain in detail in <b>Part VI</b> ):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
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		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	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-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990) 2021

132027 01-04-22

Schedule A (Form 990) 2021	
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# Schedule A (Form 990) 2021 America's Future Foundation Part V | Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (a)

1 4	i v j rype in Non-1 unctionally integrated 505	(a)(o) Supporting Orge	anizations (contine	uea)	
Secti	on D - Distributions		1		Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
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 purpose	es of supported organizatior	IS	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in <b>Part VI</b> )		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	he organization is responsive	e		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2021 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-2021	ns	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2021				
a	From 2016				
b	From 2017				
c	From 2018				
d	From 2019				
e	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2021 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2017				
-	Excess from 2018				
-	Excess from 2019				
	Excess from 2020				
е	Excess from 2021				

Schedule A (Form 990) 2021

Schedule A	(Form 990) 2021	America's	Future	Foundation	52-1928321 Page <b>8</b>
Part VI	Part IV, Section A, lines 1 line 1; Part IV, Section D,	, 2, 3b, 3c, 4b, 4c, 5a lines 2 and 3; Part IV	, 6, 9a, 9b, 9c, Section E, line	required by Part II, line 10; Part II, line 1 11a, 11b, and 11c; Part IV, Section B, lin es 1c, 2a, 2b, 3a, and 3b; Part V, line 1; F and 6. Also complete this part for any ac	nes 1 and 2; Part IV, Section C, Part V, Section B, line 1e; Part V,

## Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

* *	PUBLIC	DISCLOSURE	COPY	* *
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## Schedule of Contributors

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

2021

Employer identification number

and of the erganization		
Z	America's Future Foundation	52-1928321
Organization type (check	k one):	
Filers of:	Section:	
Form 990 or 990-EZ	$\fbox$ 501(c)( 3 ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> 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	
	n is covered by the <b>General Rule</b> or a <b>Special Rule.</b> (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	le. 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), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

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

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

 $\label{eq:LHA} \ \ \mbox{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$ 

(a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 1 X Person Payroll 791,800. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 2 X Person Payroll 420,500. Noncash \$ (Complete Part II for noncash contributions.) (b) (c) (d) (a) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution 3 X Person Payroll 200,000. Noncash \$ (Complete Part II for noncash contributions.) (c) (d) (a) (b) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 4 Х Person Payroll 175,000. Noncash \$ (Complete Part II for noncash contributions.) (b) (c) (a) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 5 X Person Payroll 160,000. Noncash \$ (Complete Part II for noncash contributions.) (b) (c) (d) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 6 X Person Pavroll 75,000. Noncash \$ (Complete Part II for noncash contributions.)

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

Part I

Employer identification number

52-1928321

Schedule B (Form 990) (2021)

Schedule B (Form 990) (2021) Name of organization

Part I

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>NO.</u>	Name, address, and ZIP + 4		
7		\$ <u>55,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$45,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$ <u>48,996.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	·	\$	Person Payroll Noncash Complete Part II for noncash contributions.)

Employer identification number

52-1928321

Schedule B (Form 990) (2021)

No.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions.)	Date received
		\$	
(-)			
(a) No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate) (See instructions.)	Date received
Part I		(000 mon 2000)	
		\$	
(a) No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate) (See instructions.)	Date received
Part I			
		\$	
(a) No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	Date received
Part I		(See instructions.)	
——			
		<u> </u>	
		\$	
(a)		(c)	
No. from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I	Description of noncash property given	(See instructions.)	Date received
		\$	
(a)		(c)	
No. from	(b)	FMV (or estimate)	(d)
Part I	Description of noncash property given	(See instructions.)	Date received
<u> </u>			
—   <u> </u>			
		\$	Schedule B (Form 990) (20

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

Name of organization

(a)

Page 3 Employer identification number

52-1928321

(c)

Schedule I	B (Form 990) (2021)		Page 4
Name of o	rganization		Employer identification number
Ameri	ca's Future Foundation		52-1928321
Part III		) through (a) and the following line entr	ction 501(c)(7), (8), or (10) that total more than \$1,000 for the year
	Use duplicate copies of Part III if additional	space is needed.	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
ł			
-	Transferee's name, address, a	(e) Transfer of gift Ind ZIP + 4	Relationship of transferor to transferee
(a) No.			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, a		Relationship of transferor to transferee

SCHEDULE I	)
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Department of the Treasury Internal Revenue Service

(Form 9	90)
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132051 10-28-21

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 organization

### America's Future Foundation

Pa	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the							
	organization answered "Yes" on Form 990, Part IV, lir	ie 6. (a) Donor advised funds	(b) Funds and other accounts					
	Table work and after an	(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		d frue de					
5	Did the organization inform all donors and donor advisors in	-						
e	are the organization's property, subject to the organization's							
6	Did the organization inform all grantees, donors, and donor a							
	for charitable purposes and not for the benefit of the donor of impermissible private benefit?	· · · · ·						
Pa		nanization answered "Yes" on Form 990 Pa						
1	Purpose(s) of conservation easements held by the organizat	-						
•	Preservation of land for public use (for example, recrea		historically important land area					
	Protection of natural habitat		certified historic structure					
	Preservation of open space							
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of	a conservation easement on the last					
-	day of the tax year.		Held at the End of the Tax Year					
а	Total number of conservation easements		2a					
b	- · · · · · · · · · · ·							
c	Number of conservation easements on a certified historic sti							
	Number of conservation easements included in (c) acquired							
-	listed in the National Register		2d					
3	Number of conservation easements modified, transferred, re							
	year ►	, , , ,	5 5					
4	Number of states where property subject to conservation ea	sement is located						
5	Does the organization have a written policy regarding the pe							
	violations, and enforcement of the conservation easements		Yes No					
6	Staff and volunteer hours devoted to monitoring, inspecting,							
		-						
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservatio	on 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)?		YesNo					
9	In Part XIII, describe how the organization reports conservat							
	balance sheet, and include, if applicable, the text of the foot	note to the organization's financial statemen	ts that describes the					
	organization's accounting for conservation easements.							
Pa	t III Organizations Maintaining Collections o		er Similar Assets.					
	Complete if the organization answered "Yes" on Form	1 990, Part IV, line 8.						
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement and	d balance sheet works					
	of art, historical treasures, or other similar assets held for pu	blic exhibition, education, or research in furt	herance of public					
	service, provide in Part XIII the text of the footnote to its fina	ncial statements that describes these items.						
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue statement and ba	lance sheet works of					
	art, historical treasures, or other similar assets held for public	c exhibition, education, or research in further	rance 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	· · · ·	jain, provide					
	the following amounts required to be reported under FASB A	-						
	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	s for Form 990.	Schedule D (Form 990) 2021					

	dule D (Form 990) 2021 America t III Organizations Maintaining C	's Future Collections of A				or Othe				L Page <b>2</b>
3	Using the organization's acquisition, accessi									
•	collection items (check all that apply):		,				gimeant			
а	Public exhibition	c	1 L	Loan or exc	hange progra	am				
b	Scholarly research	e			515					
с	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	in how th	nev further t	he organizati	on's exer	npt purpo	se in Par	t XIII.	
5	During the year, did the organization solicit of									
	to be sold to raise funds rather than to be ma								Yes	No No
Par	t IV Escrow and Custodial Arran									
	reported an amount on Form 990, Pa			U U						
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for	contribution	is or other as	sets not	included			
	on Form 990, Part X?								Yes	🗌 No
b	If "Yes," explain the arrangement in Part XIII									
		·	Ū						Amount	
с	Beginning balance						1c			
	Additions during the year									
	Distributions during the year									
f	Ending balance									
2a	Did the organization include an amount on F								Yes	No
b	If "Yes," explain the arrangement in Part XIII.	. Check here if the e	xplanatio	on has been	provided on	Part XIII				
Par	t V Endowment Funds. Complete i	if the organization ar	nswered	"Yes" on Fo	orm 990, Parl	t IV, line 1	0.			
		(a) Current year	(b) F	rior year	(c) Two yea	rs back	( <b>d)</b> Three ye	ears back	(e) Four	years back
1a	Beginning of year balance									
b	Contributions									
с	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1	g, column (a	a)) held as:					
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
с	Term endowment	%								
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.								
3a	Are there endowment funds not in the posse	ession of the organiz	ation that	at are held a	nd administe	ered for th	ne organiz	ation	_	
	by:									Yes No
	(i) Unrelated organizations								3a(i)	
	(ii) Related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organization	ations listed as requi	ired on S	Schedule R?					3b	
	Describe in Part XIII the intended uses of the		owment	funds.						
Par	t VI Land, Buildings, and Equipm	nent.								
	Complete if the organization answere	d "Yes" on Form 99	0, Part IV	V, line 11a. S	See Form 990	), Part X,	line 10.			
	Description of property	(a) Cost or c		(b) Cost	or other		cumulate	d	(d) Book	value
		basis (investr	ment)	basis	(other)	dep	preciation			
1a	Land									
	Buildings									
	Leasehold improvements									
d	Equipment				8,438.		4,82	29.		3,609.
	Other									
Tota	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, colur	nn (B), line 1	0c.)					3,609.

Schedule D (Form 990) 2021

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	d-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	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	e 15.)		
Part X Other Liabilities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	5.
1.(a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	e 25.)	<b>&gt;</b>	

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

Sche	Schedule D (Form 990) 2021 America's Future Foundation 5					Page <b>4</b>
Pa	rt XI Reconciliation of Revenue per Audited Financial Statements	s With				
	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	2,125	,340.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a				
b	Donated services and use of facilities	2b				
с	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIII.)	2d	39,936.			
е	Add lines <b>2a</b> through <b>2d</b>			2e		,936.
3	Subtract line 2e from line 1			3	2,085	,404.
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	4a				
b	Other (Describe in Part XIII.)	4b				
с	Add lines <b>4a</b> and <b>4b</b>			4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	2,085	<u>,404.</u>
Pa	rt XII Reconciliation of Expenses per Audited Financial Statement	ts 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	1,698	<u>,631.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a				
b	Prior year adjustments	2b				
с	Other losses	2c				
d	Other (Describe in Part XIII.)	2d	39,936.			
е	Add lines <b>2a</b> through <b>2d</b>			2e		,936.
3	Subtract line 2e from line 1			3	1,658	<u>,695.</u>
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	4a				
b	Other (Describe in Part XIII.)	4b				
с	Add lines <b>4a</b> and <b>4b</b>			4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	1,658	,695.
Pa	rt XIII Supplemental Information.					

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

## Part X, Line 2:

The 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.

## Part XI, Line 2d - Other Adjustments:

## Sublease rental expenses

39,936.

art XII, Line 2d - Other Adjustments:	
ublease rental expenses	39,93

 Schedule D (Form 990) 2021
 America's

 Part XIII
 Supplemental Information (continued)

52-1928321 Page 5

SC	HEDULE J   Compensation Information	I	OMB No. 1	1545-00	47
	rm 990) For certain Officers, Directors, Trustees, Key Employees, and Highest		20	<b>91</b>	
<b>1</b>	Compensated Employees		20		ł
-	tment of the Treasury Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		Open to	Publ	ic
	tment of the Treasury al Revenue Service ► Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe		
Nam		mployer ide	entificatio	on nu	mber
	America's Future Foundation	52-19	2832	1	
Pa	rt I Questions Regarding Compensation				
			_	Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 99	90,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or charter travel Housing allowance or residence for personal	luse			
	Travel for companions Payments for business use of personal resid	lence			
	Tax indemnification and gross-up payments				
	Discretionary spending account Personal services (such as maid, chauffeur, or	chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or				
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain		1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?		. 2		L
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's				
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization	ı to			
	establish compensation of the CEO/Executive Director, but explain in Part III.				
	X         Compensation committee         Written employment contract				
	Independent compensation consultant				
	Form 990 of other organizations	nmittee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
-	organization or a related organization:				
а	Receive a severance payment or change-of-control payment?		4a		х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?		·		X
	Participate in or receive payment from an equity-based compensation arrangement?				x
Ŭ	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation				
	contingent on the revenues of:				
а	The organization?		5a		Х
	Any related organization?				X
	If "Yes" on line 5a or 5b, describe in Part III.				
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation				
	contingent on the net earnings of:				
а	The organization?		. 6a		Х
	Any related organization?				Х
	If "Yes" on line 6a or 6b, describe in Part III.				
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments				
	not described on lines 5 and 6? If "Yes," describe in Part III		. 7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the				
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		. 8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in				
	Regulations section 53.4958-6(c)?		. 9		
LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedul	e J (Forn	n 990)	2021

## 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.

		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC ( compensation			other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) Claire Kittle Dixon	(i)	157,452.	0.	0.	0.	17,764.	175,216.	0.
Executive Director, Talent Market	(ii)	0.	0.	0.	0.	0.		0.
(2) Cindy Cerquitella	(i)	132,500.	25,000.	0.	0.	7,262.	164,762.	0.
Executive Director	(ii)	0.	0.	0.	0.	0.		0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(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) 2021

SCHEDULE	0
(Form 990)	

Name of the organization



Employer identification number 52 - 1928321

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

America's Future Foundation

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	71,970.
Management and general expenses	0.
Fundraising expenses	9,353.
Total expenses	81,323.

Photography:

Program service expenses	6,811.
Management and general expenses	0.
Fundraising expenses	885.
Total expenses	7,696.

Schedule O (Form 990) 2021	Page <b>2</b>
Name of the organization America's Future Foundation	Employer identification number 52-1928321
Other:	
Program service expenses	91,657.
Management and general expenses	0.
Fundraising expenses	11,912.
Total expenses	103,569.
Total Other Fees on Form 990, Part IX, line 11g, Col A	192,588.

Form 990, Part XII, Line 2c:

The organization's Board of Directors is responsible for oversight of

the audit, including selection of the independent accountant. The

process has not changed from previous years.