Form	990
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# \*\* PUBLIC DISCLOSURE COPY \*\* Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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.

Open to Public Inspection

		of the Treasury enue Service	Go to www.irs.gov/Form990 for instructions and	,		Open to Public Inspection
			ar year, or tax year beginning and	d ending		
	Check if pplicat		forganization		D Employer identificat	on number
	Addr	ess HISP	ANIC FAMILY FOUNDATION, INC.			
	Name	9	usiness as		46-4181468	
	Initia		and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	
	Final returr	v 3955	NOLENSVILLE PK	119	615-383-44	32
	termi ated	n-	own, state or province, country, and ZIP or foreign postal code		<b>G</b> Gross receipts \$	361,224.
	Amer returr	nded NTACU	VILLE, TN 37211		H(a) Is this a group retur	n
	Appli tion	<sup>ca-</sup> <b>F</b> Name a	nd address of principal officer: DIANE JANBAKHSH		for subordinates?	Yes X No
	pend	Ing SAME	AS C ABOVE		H(b) Are all subordinates includ	ed? Yes No
11	Tax-e>	empt status: [		) or 📃 527	If "No," attach a list	. See instructions
<u>ا ا</u>	Nebs		ANICFAMILYFOUNDATION.COM		H(c) Group exemption n	
			X Corporation Trust Association Other	L Year	of formation: 2014 M S	tate of legal domicile: ${f TN}$
Pa	art I	Summary				
đ	1		be the organization's mission or most significant activities: ASSI	MILATI	ON OF HISPANI	C PERSONS
Governance		INTO TH	E SURROUNDING COMMUNITY			
srna	2	Check this bo	x if the organization discontinued its operations or dispo	osed of more	than 25% of its net assets	
Š0	3					4
	4		dependent voting members of the governing body (Part VI, line 1b)			4
es	5		of individuals employed in calendar year 2022 (Part V, line 2a)			4
Activities &	6		of volunteers (estimate if necessary)			100
Act						0.
	b	Net unrelated	business taxable income from Form 990-T, Part I, line 11	<u></u>		Current Year
		O and the diama			203,432.	285,325.
ne	8		and grants (Part VIII, line 1h)		36,671.	43,517.
Revenue	9	•	ice revenue (Part VIII, line 2g)		0.	<u> </u>
Be	10		come (Part VIII, column (A), lines 3, 4, and 7d) e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		8,471.	32,382.
	11		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		248,574.	361,224.
	13		milar amounts paid (Part IX, column (A), lines 1-3)		60,883.	60,838.
	14		to or for members (Part IX, column (A), line 4)		0.	0.
	45		r compensation, employee benefits (Part IX, column (A), lines 5-10)		106,874.	127,917.
Ises	16a		undraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses	b		ing expenses (Part IX, column (D), line 25)11, 0	85.		
ш	17		es (Part IX, column (A), lines 11a-11d, 11f-24e)		124,200.	148,634.
			es. Add lines 13-17 (must equal Part IX, column (A), line 25)		291,957.	337,389.
	19	Revenue less	expenses. Subtract line 18 from line 12		-43,383.	23,835.
OL				Be	eginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (	Part X, line 16)		31,360.	49,073.
tAs	21	Total liabilities	s (Part X, line 26)		303,338.	290,197.
			fund balances. Subtract line 21 from line 20		-271,978.	-241,124.
Pa	art II	Signature	e Block			
I Los al					and a second the three here at a former of the	

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

Sign	Signature of officer		Date					
Here	DIANE JANBAKHSH, EXECUTIV	E DIRECTOR						
	Type or print name and title							
	Print/Type preparer's name	Preparer's signature	Date Check	PTIN				
Paid	KEN YOUNGSTEAD	KEN YOUNGSTEAD	11/06/23 <sup>"</sup> self-e	mployed P00320901				
Preparer	Firm's name KRAFTCPAS PLLC		Firm's EIN	62-0713250				
Use Only	Firm's address 555 GREAT CIRCLE	ROAD						
	NASHVILLE, TN 372	28	Phone no.	615-242-7351				
May the IF	RS discuss this return with the preparer shown abo	ve? See instructions		X Yes No				
232001 12-1	232001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2022)							

	n 990 (2022) HISPANIC FAMILY FOUNDATION, INC. 46-41814 rt III Statement of Program Service Accomplishments	68 <sub>Page</sub> 2
ια		
	Check if Schedule O contains a response or note to any line in this Part III	·····
1	Briefly describe the organization's mission:	
	TO IMPROVE THE QUALITY OF LIFE FOR HISPANIC FAMILIES IN MIDDLE	
	TENNESSEE, WORKING THROUGH THE PLATFORMS OF ECONOMIC, EDUCATION,	
	SOCIAL SERVICES, ADVOCACY, AND CULTURE TO PROVIDE PROGRAMS THAT	
	STRENGTHEN THE NASHVILLE HISPANIC COMMUNITY.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
2		Yes X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes 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 measured by expe	enses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expension	
	revenue, if any, for each program service reported.	500, 414
		29,830.)
4a		<u> </u>
	BAILA PROGRAM - AFTER SCHOOL DANCE, MUSIC, AND ART PROGRAM FOR UN	
	PRIVILEGED KIDS. DANCE CLASSES INCLUDE: BALLET, FOLKLORE, AND KUN	GFU.
	MUSIC INSTRUMENTS INCLUDE THE GUITAR, UKELELE, AND PIANO.	
4b	(Code: ) (Expenses \$ 82,159. including grants of \$ 60,838.) (Revenue \$	11,600.)
40	EDUCATION PROGRAM - PROVIDED ESL CLASSES FOR ADULTS WHOSE SECOND	<u>,,,,,,</u> ,
	LANGUAGE IS ENGLISH. THIS PROGRAM ALSO PROVIDES ADULT COMPUTER CL	
	ROBOT CLASSES FOR KIDS, RADIO COMMUNITY OUTREACH, A BANK EDUCATIO	N
	PROGRAM, AND A HIGH SCHOOL EQUIVALENT DIPLOMA (HISET).	
4c	(Code: ) (Expenses \$ 82,159. including grants of \$ ) (Revenue \$	2,087.)
	HEALTH PROGRAM - PROVIDES GOVERNMENT INSURANCE EDUCATION AND	
	ENROLLMENT, WIC PROGRAM EDUCATION AND ENROLLMENT, MENTAL HEALTH	
	PROGRAM, SEXUAL ASSAULT EDUCATION AND THERAPY, AND A COVID PANDEM	тс
	RESPONSE ASSISTANCE.	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$ )	
4e	Total program service expenses 273,864.	
		orm 990 (2022)
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 Form 990 (2022)
 HISPANIC FAMILY FOUNDATION, INC.

 Part IV
 Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
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			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		_X_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		_X_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			77
	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			v
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
_	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		х	
Ŀ	Part VI	11a		
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	116		x
•	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u></u>
C	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	11c		x
Ь	assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part VIII</i> 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			
u		11d		х
۵	Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i> Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11e	х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	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		Х
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,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part 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			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		L
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	0000	Х
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 HISPANIC FAMILY FOUNDATION, INC.
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 Part IV
 Checklist of Required Schedules (continued)
 Continued)
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 Continued

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
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
b	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person 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			
		25b		x
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
07		20		- 23
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
~~	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		x
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		x
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
•••	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	<u> </u>		
	Notes All Forms 000 files are used to complete Ochockila O	38	х	
Par				·
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1.0	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		162	
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable1aEnter the number of Forms W-2G included on line 1a. Enter -0- if not applicable1b			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
С		4.	Х	
00005	(gambling) winnings to prize winners?	1c		l (2022)
232004	¥ 12-13-22	Form		(2022)

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Part W       Statements Regarding Other IRS Filings and Tax Compliance       continued         2a       Enter the number of employees reported on Form W.3. Transmittal of Wage and Tax Statements.       a       d       A         b       If a task one is reported on line 2a, did the organization file all required fockel employment tax returns?       ab       X       A         b       If a task one is reported mole basines gross on the organization have an integration have an integration of the 2000 more during the values year (2000 more during the values year)       Aa       Aa <t< th=""><th>Form</th><th>990 (2022) HISPANIC FAMILY FOUNDATION, INC.</th><th>46-4181</th><th>468</th><th>Pa</th><th>age <b>5</b></th></t<>	Form	990 (2022) HISPANIC FAMILY FOUNDATION, INC.	46-4181	468	Pa	age <b>5</b>
2a         East the number of employees reported on Form W-3. Transmittal of Wege and Tax Statements.         2a         4           b Tate least one is reported on line 2a, dd the organization file all required federal employment tax returns?         3a         X           b Date the organization have unclude business groups income of 51000 memo during the year?         3a         X           b T Yes, 'hast if tied a Form 900-Tixe this year. (dt the organization have an integet in, or 3 Synahue or or Schedule O         3b         X           b T Yes, 'hast if tied a Form 900-Tixe this year. (dt the organization have an integet in, or 3 Synahue or or abouting the authority over, a francial account is to film organization have construct year.         4a         X           b T Yes, 'hast the name of the breigh country (buch as bark state scout, scout, or the francial accounts (FBAP).         5a         X           c T Yes, 'enter the name of the breigh country (buch as bark transaction at any time during the tax year?)         5a         X           c T Yes, 'enter the organization that are normally greater than \$100.000, and did the organization solid as about transaction at any time during the tax year?)         5a         X           b T Yes, 'enter the name of the breigh country was a cantribution an optic state are normally greater than \$100.000, and did the organization solid max organization nealer as a contribution or quifts were not tax deductible?         5a         X           b T Yes, 'enter the mane and the breigh country was as contribution an aprift propoid and strikes provided	Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)				
International encoded and the second deviation of the regulation regulation of the regulation of the regula					Yes	No
b       It least one is reported on line 2a, of the organization that include employment tax returns?       2b       7b       7b <td< th=""><th>2a</th><th>Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,</th><th></th><th></th><th></th><th></th></td<>	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
b       If a least one is reported on line 2a, dd the organization file all required federal employment tax returns?       2b       X         a       Didt the organization have unrelated business groups income of \$1,000 mme during the year?       3b       X         a       At any line during the calendar year? If We't 5 (are 3b, provide an exploration or 05 chedule 0       3b       X         a       At any line during the calendar year? If We't 5 (are 3b, provide an exploration or other funcial account?       4c       X         b       If "res," institute the name of the foreign country (buch as a bank account, securities account, or other funcial accounts (FBAR).       5a       X         5a       Did any taxable party ontilty the organization that was or is a party to a prohibited ta wheelt transaction?       5a       X         6       Did any taxable party ontilty the organization that was or is a party to a prohibited ta wheelt transaction?       5a       X         b       If "Yes," to line is a of is, did the organization that was orealy grader than \$100,000, and did the organization solid any contributions and arrow particle taxable at a normaly grader than \$100,000, and did the organization solid the organization that was receive deductible contributions and arrow particle taxable at a normaly grader than \$100,000, and did the organization solid the organization have parts on the organization tax be accortibutions and arrow parts on the solid tax bear?       5a       X         b       If "Yes," intell the organization have barty has a contribution ar		filed for the calendar year ending with or within the year covered by this return	2a 4			
ab Did the organization have unrelated business gross income of \$1,000 or more during the year?         ga         X           b II **se, "nate during the calendar year, did the organization have an interest in, or a signature or other authority over, a famorial accountly over, a dimensional accountly over, a signature or other authority over, a dimensional accountly over, a dimensional accountly over, a signature or other authority over, a dimensional accountly over, a dimensional account or the organization aparts to a prohibited tax shelter transaction at any time during the tax year?         dimensional dimensio dimensio dimensional dimensional dimensional dimensional dimen	b		?	2b	Х	
b       If "Yes," has it field a form 990-Tor this yea? yeb" to fire 3b, provide an explement on or Schedule 0       3b         da At any time during the calendary yeas, dit the organization have an interest in, or a algoritude or other authority over, a       data any time during the calendary yeas, dit the organization have any time during the tax year?       b       Yes, "enter the name of the foreign country (such as a back account, securities account, or other financial account is a party to a prohibited tax shafter transaction?       ba       X         5a       Was the organization have annual pross received that was or is a party to a prohibited tax shafter transaction?       ba       X         c       If Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shafter transaction?       ba       X         db       Dod any taxability to a prohibited tax shafter transaction?       ba       X         db       Dod any taxability to a prohibited tax shafter transaction?       ba       X         db       Dod any taxability to a prohibited tax shafter transaction?       ba       X         db       If Yes," to line form 6302, for mate party is a contributions or gifts       ba       X         db       If Yes," think the organization include with every solication an express statement that such contributions or gifts       ba       X         db       If Yes," indicate the number of Forms 8282 filed during the year       If Zd       Zd				3a		Х
4a       At any time during the calendary year, do the organization have an interest in, or a signature or other authority over, a financial account is (securities account), or other financial accounts (FBAR).       4a       X         b       If "Yes," enter the name of the foreign country (such as a bank account, securities account, or other authority over, a financial accounts (FBAR).       5a       X         5a       Was the organization to gravity to a prohibited tax is thefer transaction?       5a       X         5b       If 'Yes' in the Garanization that it was or is a party to a prohibited tax shefer transaction?       5a       X         6a       Do bes the organization have annual gross neelpts that are normally greater than \$100,000, and did the organization solid any contributions that even so exhatble contributions or gifts were not tax deductibles contributions and ersection TMQC).       7a       X         b       If 'Yes," idd the organization include with every solicitation are express statement that such contributions or gifts were not tax deductibles contributions and ersection TMQC).       7a       X         b       If 'Yes," idd the organization notity the donor of the value of the poods or services provided?       7a       X         c       If 'Yes," idd the organization notity in dimicity (to pay premiums on a personal benefit contract?       7a       X         d       If 'Yes," idd the organization notity in dimicity (to pay premiums on a personal benefit contract?       7a       X         d<				3b		
financial account in foreign county (such as a bank account, securities account, or other financial account)?     4a     X       b     fi '\est_e' reter the name of the foreign county     5a     X       5a     Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?     5a     X       5a     Was the organization the organization that two or is a party to a prohibited tax shelter transaction?     5a     X       5b     D'As in tax balance transaction at any time during the tax year?     5a     X       5b     D'As in tax balance transaction?     5a     X       5b     D'As in tax balance transaction?     5a     X       5c     Sa     Sa     Sa     Sa       5c     Sa     Sa     Sa     X       5c     Sa     Sa     X       5c     Sa     X     X     X       7c     Vasitation set a spread balance transaction set a spread balance party balance transaction set a spread balance party balance ba						
b       If "Yes," enter the name of the foreign country       Image: the instructions for filling requirements for FinCEN From 114, Report of Foreign Bank and Financial Accounts (FBAR).         58       Was the organization aperty to a prohibited tax sheller transaction at any time during the tax year?       56         50       Did any taxable party notify the organization the from 3886-17 (from 3886-17).       56         60       Does the organization have annual pross necepts that are normally greater than \$100,000, and did the organization solid: any contributions that were normal with every solicitation an express statement that such contributions or gifts were not tax deductables contributions and er section 170(c).       60         70       Organization neckle apentitie accoss (37 findities parts and contributions and er section 170(c).       7a       X         9       If "Yes," did the organization include with every solicitation are express of tangble perinonal property for which it was required to the port?       7a       X         9       If "Yes," indicate the number of Forms 3822 field during the year       7d       X         9       Did the organization receive a party pering indirectity, to pay premiums on a personal benefit contract?       7t       X         10       If "Yes," indicate the number of Forms 3822 field during the year?       7d       X         10       It organization receive a corribution of qark paters. Somparization file af earno 1084c?       7d       X         11<				4a		Х
See instructions for timing requirements for FinCEH Form 114, Report of Proving Bank and Financial Accounts (FBAR).       58         50       Was the organization a party to a prohibited tax shelter transaction?       58       X         50       Dot any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       59       X         50       Dot show taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       56       X         50       Dot show taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       56       X         50       Dift was "to line Baor 50, dot the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       60       72       X         7       Organization stat may receive deductible contributions under section 170(c).       74       X       74       74       74       74       76	b					
5a     Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?     5a     X       b     Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?     5b     X       6a     Dese the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solidt any conthibutions that were not tax deductible organization include with every solicitation an express statement that such contributions or gits were not tax deductible organization include with every solicitation and party for goods and services provided to the party of the organization notify the donor of the value of the goods or services provided?     7a     X       b     If "Yes," idid the organization notify the donor of the value of the goods or services provided?     7a     X       c     Did the organization notify the donor of the value of the goods or services provided?     7a     X       c     Did the organization notify the donor of the value of the goods or services provided?     7a     X       d     Did the organization notify the donor of the value of the donor advised fund manutanto file form 8899 as required?     7a     X       f     Did the organization notify the donor of advectly or indirectly, on a personal benefit contract?     7a     X       f     Did the organization neceves a solarishes holdings at any time during the year?     9a     7a     X       f     Did the organization neceved a contribution of called infield intellectual pro			ounts (FRAR)			
b       Dd any taxabe party notry the organization that it was or is a party to a prohibited tax shelter transaction?       55       X         c       If 'Yes' to line 5a or 5b, did the organization file Form 8888-17.       56       X         6       Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization sole annual gross receipts that are normally greater than \$100,000, and did the organization sole annual gross receipts that are normally greater than \$100,000, and did the organization sole annual gross receipts that are normally greater than \$100,000, and did the organization sole and sprint the experiment that such contributions or gifts were not tax deductible?       74       X         7       Organization sells apyment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?       74       X         9       Did the organization necive adpace of thanyble personal property for which it was required to file form 8282?       74       74       X         9       Did the organization necive and contribution of cars, boats, airplanes, or other vehicles, did the organization file form 1896.07       77       74       X         9       Sponsoring organization necive and contribution or dars, boats, airplanes, or other vehicles, did the organization file form 1896.7       74       X         9       Sponsoring organization neaves and advised funds.       74       74       74       74       74       74       74       74	50		. ,	50		x
c     If "Yes" to line 5a or 5b, did the organization file Form 8886-T7     5c       6a     Dess the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible     6a     X       b     If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?     6a     X       c     Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?     7a     X       b     If "Yes," did the organization notify the donor of the value of the goods or services provided?     7a     X       c     Did the organization notify or indirectly, to pay premiums on a personal benefit contract?     7a     X       d     If "Yes," indicate the number of Forms 8282 filed during the year     7d     7a     X       f     Did the organization neceive any funds, directly or indirectly, on a personal benefit contract?     7a     X       g     If the organization neceive a contribution of qualified intellectual property, diff worganization file a Form 1098-C?     7a     X       g     If the organization neceive a contribution or darke in during the year?     9a     9a       9     Sponsoring organization neceive a contribution or darke in during the year?     9a     9a       9     Sponsoring organization neceive and contribution or darke during the ye						
Ga     Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that ware not tax deductible as chartable contributions?     Ga     X       b     If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?     Ga     X       c     Or organizations that may receive deductible contributions and party for goods and services provided to the payor?     7a     X       c     Did the organization notify the doon or off were shore off the ogoods or services provided?     7b     Ta       c     Did the organization notify the doon or off were shore off?     7c     X       d     If 'Yes,'' did the organization notify the doon or off were shore off?     7c     X       d     If 'Yes,'' did the organization notify the doon or divised the organization file form 8282?     7c     X       d     If 'Yes,'' did the organization receive a contribution of qualified intellectual property, did the organization file Form 8282?     7d     7d       f     H the organization memory anitation goor advised funds. Did a doon advised fund similarined by the sponsoring organization maintaining door advised funds. Did a doon advised rom advised funds.     7d     7d       f     Sponsoring organization make any taxable distributions on a club ad life form 8282?     9a     9b       D did the sponsoring organization make any taxable distributions on advised funds.     1da						
any contributions that were not tax deductible as charitable contributions?     6a     X       b ff "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?     6b       7 Organizations that may receive deductible contributions under section 170(c).     7c     X       b Uf the organization notify the done of the value of the goods or services provided?     7c     X       c Did the organization notify the done of the value of the goods or services provided?     7c     X       c Did the organization notify the done of the value of the goods or services provided?     7c     X       d If "Yes," indicate the number of Forms 8282 filed during the year     Zd     7c     X       f Did the organization neeview a contribution of gas, boat springenes, or other values of the organization file Form 8908 as required?     7d     X       g If the organization neeview a contribution of cars, boats, anjtimes, or other values, differed preson?     8     9       9 Sponsoring organization neeview a contribution of cars, boats, anjtimes, or other values, differed preson?     8     9       9 Sponsoring organization neeview a contribution of cars, boats, anjtime during the year?     9     8       9 Sponsoring organization neeves building at any time during the year?     9     8       9 Sponsoring organization neeves building at any time during the year?     9     8       9 Sponsoring organization neeves the any time during the				50		
b       If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       60         7       Organizations that may receive deductible contributions under section 170(c).       7a       X         10       If the organization receive a payment in necess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7a       X         c       Did the organization notify the doors of the value of the goods or services provided?       7c       X         d       If "Nes," indicate the number of Forms 8282 filed during the year       7d       X         d       If "Nes," indicate the number of Forms 8282 filed during the year       7d       X         d       If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7d       X         ft the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7n       X         g the organization maintaining door advised funds. Did a door advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       9a       9b       50         D did the sponsoring organization. maintaining door advised funds. Did a close of club facilities       10a       10a       10a         1       1       1       10a       10a <th>6a</th> <th></th> <th></th> <th></th> <th></th> <th>v</th>	6a					v
were not tax deductible?     60       7     Organizations that may receive deductible contributions under section 170(c).     7a       8     Did the organization neity the donor of the value of the goods or services provided?     7b       7     Tyes, ' did the organization neity the donor of the value of the goods or services provided?     7c       7     Tyes, ' did the organization neity the donor of the value of the goods or services provided?     7c       7     Tyes, ' indicate the number of Forms 8282 filed during the year     Tol     7c       8     Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?     7c     X       9     If the organization receive a contribution of cars, boats, airplanes, or other vehicles, did the organization file or M8980 as required?     7h     X       9     If the organization make any taxable distributions under section 4966?     9a     9a       9     Sponsoring organization make any taxable distributions under section 4966?     9a     9a       9     Did the sponsoring organization make any taxable distributions under section 4966?     9a     9a       9     Did the sponsoring organization make any taxable distributions under section 4966?     9a     9b       10     Bit the sponsoring organization make any taxable distributions on a divisor, or related person?     9a     9a       10     Section 5010(x) organizations. Enter:<				<u>6a</u>		
7       Organizations that may receive deductible contributions under section 170(c).       a) lid the organization neetive a payment in excess of S/G made parity as a contribution and parity for goods and services provided to the payor?       7a       X         b) If 'Yes,' id the organization notify the door of the value of the goods or services provided?       7b       -         c) Did the organization ontify the door of the value of the goods or services provided?       7c       X         d) If 'Yes,' indicate the number of Forms 8282? Iiied during the year       7d       X         g) If the organization during the year, pay premiums, on a personal benefit contract?       7f       X         g) If the organization during the year, pay premiums, directly or indirectly, or a personal benefit contract?       7f       X         g) If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7h       X         S Sponsoring organization make any taxable distributions under section 4966?       9a       9b       9b         S Section 501(c)(7) organizations. Enter:       10a       10a       10a       10a         G Gross income from members or shareholders       11a       10a       10a       10a       10a         B Section 501(c)(2) organization. Enter:       a contributions included on Part VIII, line 12, for public use of club facilities       11a       11a       11a	b		s or gifts			1
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided?       7a       X         b If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b       7c       X         b If "Yes," did the organization and exchange, or therwise dispose of tangible personal property for which it was required to file Form 8282?       7c       X         d If "Yes," dindcate the number of Form 8282? Hied during the year       7d       7c       X         e Did the organization seleve any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7c       X         f U did the organization received a contribution of cars. boats, airplanes, or other vehicles, did the organization file Form 1098-C?       7h       X         g If the organization neave excess business holdings at any time during the year?       7g       A       7h       X         9 Sponsoring organization nave excess business holdings at any time during the year?       9a       A       A         9 Station 501(c)(7) organizations. Enter:       10a       9a       A       A         10 Section 501(c)(10) organizations. Enter:       10a       10b       A       A         11 Section 501(c)(10) organizations. Enter:       10a       10b       A       A         12 Section 501(c)(10) organization. Sector:       10a       <				6b		
b       If Yes," did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 88282.       7c       X         d       If Yes," indicate the number of Forms 8822. File during the year       7d       7c       X         d       If Yes," indicate the number of Forms 8822. File during the year indicately, to pay premiums on a personal benefit contract?       7c       X         f       Did the organization received a contribution of qualified intellectual property, did the organization for forms 8828. File during the year, appreniums, directly or indirectly, on a personal benefit contract?       7r       X         f       If the organization neceived a contribution of daribidied intellectual property, did the organization forms 8828.       7g       X         f       If the organization neceived a contribution of daribidied intellectual property, did the organization falls for moles.CP       8       Seponsoring organization make any taxable distributions under section 49667       8       9a       9a         g)       Did the sponsoring organization make any taxable distribution under section 49667       9a						
c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       X         d If 'Yes,' indicate the number of Forms 8282 filed during the year       7d       7d       X         e       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         f       Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098.0?       7h       X         g       Did the spansoring organization maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       9a       9a         g       Did the sponsoring organization make any taxable distributions under section 4966?       9a       9b         g orss income from members or shareholders       10a       10a       10b       10b         l       Gross income from members or shareholders       10a       10b       10b       10b         l       Gross income from members or shareholders       11a       10b       10b       10c         l       Section 501(c)(2) qualitations. Enter:       10b       10b       10c       10c </th <th>а</th> <td>Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and service</td> <td>es provided to the payor?</td> <td>7a</td> <td></td> <td><u> </u></td>	а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and service	es provided to the payor?	7a		<u> </u>
to file Form 8282?       7c       X         d If "Yes," indicate the number of Forms 8282 filed during the year       7d       7d       X         Did the organization receives any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         f Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7f       X         g If the organization received a contribution of cars, boats, aipplanes, or other vehicles, did the organization file Form 8899 as required?       7f       X         g Sponsoring organizations maintaining door advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       9a       9a         g Did the sponsoring organizations maintaining door advised funds.       9a       9b       9a       9b         g Sonesoring organization make any taxable distributions under section 4966?       9a       9a       9b       9	b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
d If "Yes," indicate the number of Forms 8282 filed during the year       Td         e Did the organization, during the year, pay premiums, on a personal benefit contract?       Te       X         f If the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       Td       X         g If the organization during the year, pay premiums, directly or indirectly, on a personal benefit contract?       Td       X         g If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-0?       Sponsoring organizations maintaining door advised funds.       Td       Th         9 Sponsoring organization make and thirbutions under section 49667       9a       9a       9a       9a         10 dit be sponsoring organization make and istributions included on Part VIII, line 12       10a       10b       10b <th>С</th> <td>Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was</td> <td>required</td> <td></td> <td></td> <td>1</td>	С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	required			1
e       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         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       7n       X         g       If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?       7n       7n       X         g       Sponsoring organization maintaining door advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       9a       9a </th <th></th> <td>to file Form 8282?</td> <td></td> <td>7c</td> <td></td> <td><u> </u></td>		to file Form 8282?		7c		<u> </u>
f       Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       71       X         g       If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?       73       74       75       75       76	d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
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 organization maintaining donor advised funds.       8         9 Sponsoring organizations maintaining donor advised funds.       8         a Did the sponsoring organization make any taxable distributions under section 4966?       9a         9 Did the sponsoring organization make a distribution to a donor, donor adviser, or related person?       9b         10 Bestion 501(c)(7) organizations. Enter:       10a         a initiation fees and capital contributions included on Part VIII, line 12.       10a         11 Section 501(c)(12) organizations. Enter:       11a         a Gross income from members or shareholders       11a         12a       11b         12a       12b         13 Section 501(c)(2) organizations. Enter:       11a         13a       11b         12a       11b         12a       12b         13       Section 501(c)(2) organizations intervest ceved or accrue during the year         13a       11b         14a       12a         15       System the amount of tax-exempt intherest received or accrue during the year <th>е</th> <td>Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit con</td> <td>tract?</td> <td>7e</td> <td></td> <td>Х</td>	е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit con	tract?	7e		Х
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 make any taxable distributions under section 4966?       8a         9       Sponsoring organizations maintaining donor advised funds.       9a         0       Did the sponsoring organization make any taxable distributions under section 4966?       9a         10       Section 501(c)(7) organizations. Enter:       10a       10a         11       Section 501(c)(2) organizations. Enter:       10a       10a         12       Section 501(c)(12) organizations. Enter:       11a       11a         13       Section 501(c)(12) organizations. Enter:       11a       11b         13       Section 501(c)(12) organizations. Enter:       11b       11b         14       Section 501(c)(12) organizations. Enter:       11b       12a         15       Section 501(c)(12) organizations. Enter:       11b       12a         16       Gross income from members or shareholders       11a       12a         17       bit f*Yes,* enter the amount of tax-exempt interest received or accrued during the year       12b       12a         18       bit organization is lequalified health plans in	f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract	t?	7f		Х
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 make any taxable distributions under section 4966?       8a         9       Sponsoring organizations maintaining donor advised funds.       9a         0       Did the sponsoring organization make any taxable distributions under section 4966?       9a         10       Section 501(c)(7) organizations. Enter:       10a       10a         11       Section 501(c)(2) organizations. Enter:       10a       10a         12       Section 501(c)(12) organizations. Enter:       11a       11a         13       Section 501(c)(12) organizations. Enter:       11a       11b         13       Section 501(c)(12) organizations. Enter:       11b       11b         14       Section 501(c)(12) organizations. Enter:       11b       12a         15       Section 501(c)(12) organizations. Enter:       11b       12a         16       Gross income from members or shareholders       11a       12a         17       bit f*Yes,* enter the amount of tax-exempt interest received or accrued during the year       12b       12a         18       bit organization is lequalified health plans in	g	If the organization received a contribution of qualified intellectual property, did the organization file Forn	8899 as required?	7g		
sponsoring organization have excess business holdings at any time during the year?       8         9       Sponsoring organization make any taxable distributions under section 4966?       9a         bid the sponsoring organization make any taxable distributions under section 4966?       9a       9b         10       Section 501(c)(7) organizations. Enter:       10a       10a       10b         a Initiation fees and capital contributions included on Part VIII, line 12       10a       10b       10b         11       Section 501(c)(12) organizations. Enter:       10b       10b       10b       11a         a Gross income from members or shareholders       11a       10b       11b       12a         12       Section 501(c)(22) organizations. Enter:       11b       11b       12a         a Gross income from members or shareholders       11a       10b       12a         13       Section 501(c)(22) organization futerest received or accrued during the year       12b       12a         14       Yes," enter the amount of tax-exempt interest received or accrued during the year?       13a       13a         13       Section 501(c)(22) qualified health plans in more than one state?       13a       13a         14       Did head or payments for indoor tanning services during the tax year?       14a       X         b If Ye	h					
sponsoring organization have excess business holdings at any time during the year?       8         9       Sponsoring organization make any taxable distributions under section 4966?       9a         bid the sponsoring organization make any taxable distributions under section 4966?       9a       9b         10       Section 501(c)(7) organizations. Enter:       10a       10a       10b         a Initiation fees and capital contributions included on Part VIII, line 12       10a       10b       10b         11       Section 501(c)(12) organizations. Enter:       10b       10b       10b       11a         a Gross income from members or shareholders       11a       10b       11b       12a         12       Section 501(c)(22) organizations. Enter:       11b       11b       12a         a Gross income from members or shareholders       11a       10b       12a         13       Section 501(c)(22) organization futerest received or accrued during the year       12b       12a         14       Yes," enter the amount of tax-exempt interest received or accrued during the year?       13a       13a         13       Section 501(c)(22) qualified health plans in more than one state?       13a       13a         14       Did head or payments for indoor tanning services during the tax year?       14a       X         b If Ye	8					
9 Sponsoring organizations maintaining donor advised funds.   a) Did the sponsoring organization make any taxable distributions under section 4966?   b) Did the sponsoring organization make any taxable distributions under section 4966?   b) Did the sponsoring organization make any taxable distributions under section 4966?   b) Did the sponsoring organizations. Enter:   a) Initiation fees and capital contributions included on Part VIII, line 12   b) Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities   11   b) Section 501(c)(2) organizations. Enter:   a) Gross income from members or shareholders   b) d) did the sponsoring organization filling Form 990 in lieu of Form 1041?   b) d) diverse from them.)   12a   Section 501(c)(29) qualified nonprofit health insurance issuers.   a) Is the organization licensed to issue qualified health plans in more than one state?   Note: See the instructions for additional information the organization must report on Schedule 0.   b) Enter the amount of reserves on hand   14a   14b   15   k) H'Yes, * nas it filed a Form 720 to report these payments? If *No,* provide an explanation on Schedule 0.   15   k) H'Yes,* omplete Form 4720, Schedule N.   16   is the organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4968 excise tax on net investment income?   16   X   17   17   14a   14a				8		
a 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:       10a         a Initiation fees and capital contributions included on Part VIII, line 12       10b         b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b         11 Section 501(c)(7) organizations. Enter:       11a         a Gross income from members or shareholders       11a         b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b         12a Section 691(c)(2) qualified nonprofit health insurance issuers.       12a         a Is the organization licensed to issue qualified health plans in more than one state?       13a         Note: See the instructions for additional information the organization must report on Schedule O.       13a         b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.       14a       X         b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.       14b       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?       14a       X	9					
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?       9b         10       Section 501(c)(7) organizations. Enter:       10a       10a         a Initiation fees and capital contributions included on Part VIII, line 12       10a       10b         11       Section 501(c)(12) organizations. Enter:       10a       11a       11a         a Gross income from members or shareholders       11a       11b       12a         b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       12a         12a       Section 501(c)(29) qualified nonprofit health insurance issuers.       12b       12a         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       13a       13a         14       Types," enter the amount of tax-exempt interest received or accrued during the year       13a       13a         14       Is the organization licensed to issue qualified health plans in more than one state?       13a       14a       X         14b       If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O       14a       X         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?       14a       X <t< th=""><th></th><td></td><td></td><td>9a</td><td></td><td></td></t<>				9a		
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b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       13a         a       Is the organization licensed to issue qualified health plans in more than one state?       13a         Note: See the instructions for additional information the organization must report on Schedule O.       13a         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         c       Enter the amount of reserves on hand       13c         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a       X         b       If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O       14b       14b         15       Is the organization an educational institution 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," ese the instructions and file Form 4720, Schedule N.       16       X         16       Is the organization of an excise tax under section 4968 excise tax on net investment income?       16       X         If "Yes," complete Form 4720, Schedule O.       17       17       17       17	40			40		
13       Section 501(c)(29) qualified nonprofit health insurance issuers.       13a         a       Is the organization licensed to issue qualified health plans in more than one state?       13a         Note: See the instructions for additional information the organization must report on Schedule O.       13b       13b         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       14a         c       Enter the amount of reserves on hand       13c       14a       X         144       Did the organization receive any payments for indoor tanning services during the tax year?       14a       X         b       If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> 14b       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       X       16       X         16       Is the organization an educational institution subject to the section 4968 excise tax on net investment income?       16       X         16       Is the organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4				12a		
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Note: See the instructions for additional information the organization must report on Schedule O.       Image: the instruction of the end of the en				40		
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       13b         c       Enter the amount of reserves on hand       13c       13c       14a       X         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a       X         b       If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O       14b       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       X         If "Yes," complete Form 4720, Schedule O.       16       X         If "Yes," complete Form 4720, Schedule O.       17       17         17       If "Yes," complete Form 6069.       17       17	а			13a		
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c       Enter the amount of reserves on hand       13c       14a       X         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a       X         b       If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O       14b       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       X         If "Yes," complete Form 4720, Schedule O.       16       X         If "Yes," complete Form 4720, Schedule O.       16       X         If "Yes," complete Form 4720, Schedule O.       16       X         If "Yes," complete Form 4720, Schedule O.       16       X         If "Yes," complete Form 4720, Schedule O.       17       17         If "Yes," complete Form 6069.       17       17       17	b					
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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       X         16       Is the organization an educational institution subject to the section 4968 excise tax on net investment income?       16       X         17       Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?       17       17         If "Yes," complete Form 6069.       10       10       10       10	14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		<u> </u>
excess parachute payment(s) during the year? 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? If "Yes," complete Form 4720, Schedule O. 17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069. 18 X 19 X 10 1 10 2 10 2 11 1 12 X 13 X 14 X 14 X 14 2 15 X 16 X 16 X 17 1 17	b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule	0	14b		
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, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?         If "Yes," complete Form 6069.	15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remunerate	ion or			1
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16       X         17       Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?       16       X         17       If "Yes," complete Form 6069.       16       X						
If "Yes," complete Form 4720, Schedule O.       If "Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities       If "It is the imposition of an excise tax under section 4951, 4952 or 4953?         If "Yes," complete Form 6069.       If "It is the imposition of an excise tax under section 4951, 4952 or 4953?       It is the imposition of an excise tax under section 4951, 4952 or 4953?	16		icome?	16		Х
17       Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities         that would result in the imposition of an excise tax under section 4951, 4952 or 4953?         If "Yes," complete Form 6069.						
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If "Yes," complete Form 6069.	-			17		1
	232005			Form	990	(2022)

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232005	12-13-22

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### HISPANIC FAMILY FOUNDATION, INC.

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

Section A. Governing Body and Management

46-4181468 Page 6

X

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

				_		Yes	N
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		4			
	If there are material differences in voting rights among members of the governing body, or if the governing			1			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.						
b	Enter the number of voting members included on line 1a, above, who are independent	1b		4			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	·	anv other				
-	officer, director, trustee, or key employee?			- I	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the				-		
U	of officers, directors, trustees, or key employees to a management company or other person?				3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 9				4		X
	Did the organization become aware during the year of a significant diversion of the organization's ass				5		X
5				Г	5 6		X
6 7-	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or ap			·····	0		
1a	more members of the governing body?				7a		х
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, st			····· -	74		
D					7b		х
8	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year			·····	70		- 23
		-	-		0-	Х	
	The governing body?				8a	X	
-	Each committee with authority to act on behalf of the governing body?			······	8b	-77	-
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read				9		x
00	organization's mailing address? If "Yes," provide the names and addresses on Schedule O				9		
	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code.)			~	
~				Г	10	Yes	N X
	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 ch	•					
				····· F	10b	37	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body	/ befor	e filing the fo	orm?	11a	Х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.						
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13				12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to cont	flicts?	L	12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	′es," d	escribe				
	on Schedule O how this was done				12c	Х	
3	Did the organization have a written whistleblower policy?			L	13	Х	
4	Did the organization have a written document retention and destruction policy?			L	14	Х	
5	Did the process for determining compensation of the following persons include a review and approva	l by ind	dependent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official				15a		Х
b	Other officers or key employees of the organization				15b		Х
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.						
l6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	nent w	ith a				
	taxable entity during the year?				16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ		-				
_	exempt status with respect to such arrangements?			Γ	16b		
ec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed $\_{ m TN}$						
8	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024 A, if applicable), 990, ar	nd 990	-T (section 5	01(c)(3)s	only)	availat	ole
	for public inspection. Indicate how you made these available. Check all that apply.			,	.,		
	Own website Another's website X Upon request Other (explain	on Sc	hedule ()				
9	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		,	licy, and	financ	ial	
-	statements available to the public during the tax year.			-,, and			
20	State the name, address, and telephone number of the person who possesses the organization's boo	oks and	d records				
	DIANE JANBAKHSH - 615-562-2222						
	3955 NOLENSVILLE PK, 119, NASHVILLE. TN 37211						
2004	3955 NOLENSVILLE PK, 119, NASHVILLE, TN 37211				Form	990	(20)

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

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

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

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

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

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

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

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

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

(4) HOWARD GENTRY       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (5) THOMAS MCSWEENY       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (6) MICHAEL SPALDING       1.00       0       0       0.       0.       0.       0.	(A)	(B)			(0	C)			(D)	(E)	(F)
(ist any hours for related organizations below line)ist and related organizations below line)ist and related organization (W-2/1099-NISC/ 1099-NEC)compensation from the organization (W-2/1099-NISC/ 1099-NEC)compensation from the organization and related organizations (W-2/1099-NISC/ 1099-NEC)compensation from the organization and related organizations (W-2/1099-NISC/ 1099-NEC)compensation from the organization and related organizations (W-2/1099-NISC/ 1099-NEC)compensation from the organization and related organizations(1) DIANE JANBAKSH40.00X0.0.0.EXECUTIVE DIRECTORX0.0.0.0.(2) MARK JANBAKHSH10.00X0.0.0.PRESIDENT1.00X0.0.0.(4) HOWARD GENTRY1.00X0.0.0.DIRECTORX0.0.0.0.(5) THOMAS MCSWEENY1.00X0.0.0.DIRECTORX0.0.0.0.(6) MICHAEL SPALDING1.00X0.0.0.DIRECTORX0.0.0.0.(7) GEORGE URIBE1.000.0.0.0.	Name and title	hours per	box	not c , unle	heck ss pei	more rson i	than o s both	n an	compensation	compensation	amount of
EXECUTIVE DIRECTORX0.0.0.(2) MARK JANBAKHSH10.00X0.0.PRESIDENTX0.0.0.(3) SUSANA VASQUEZ1.00X0.0.TREASURERX0.0.0.(4) HOWARD GENTRY1.00X0.0.DIRECTORX0.0.0.(5) THOMAS MCSWEENY1.00X0.0.DIRECTORX0.0.0.(6) MICHAEL SPALDING1.00X0.0.DIRECTORX0.0.0.(7) GEORGE URIBE1.0044		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key em ployee	Highest compensated employee	Former	the organization (W-2/1099-MISC/	organizations (W-2/1099-MISC/	compensation from the organization and related
(2) MARK JANBAKHSH       10.00       X       0.       0.       0.         PRESIDENT       1.00       X       0.       0.       0.       0.         (3) SUSANA VASQUEZ       1.00       X       0.       0.       0.       0.         TREASURER       X       0.       0.       0.       0.       0.       0.         (4) HOWARD GENTRY       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.       0.         (5) THOMAS MCSWEENY       1.00       X       0.       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.       0.         (6) MICHAEL SPALDING       1.00       X       0.       0.       0.       0.       0.       0.       0.         DIRECTOR       X       0. <td< td=""><td></td><td>40.00</td><td></td><td></td><td>v</td><td></td><td></td><td></td><td>0</td><td>0</td><td>0</td></td<>		40.00			v				0	0	0
PRESIDENT       X       0.       0.       0.       0.         (3) SUSANA VASQUEZ       1.00       X       0.       0.       0.       0.         TREASURER       X       0.       0.       0.       0.       0.       0.         (4) HOWARD GENTRY       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (5) THOMAS MCSWEENY       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.       0.         (6) MICHAEL SPALDING       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.       0.         (6) MICHAEL SPALDING       X       0.       0.       0.       0.       0.       0.       0.         (7) GEORGE URIBE       1.00       4       4       4       4       4       4       4       4       4       4       4       4       4 <t< td=""><td></td><td>10 00</td><td></td><td> </td><td></td><td><u> </u></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></t<>		10 00				<u> </u>			0.	0.	0.
(3) SUSANA VASQUEZ       1.00       X       0.       0.       0.         TREASURER       1.00       X       0.       0.       0.       0.         (4) HOWARD GENTRY       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (5) THOMAS MCSWEENY       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (6) MICHAEL SPALDING       1.00       X       0.       0.       0.       0.       0.         (7) GEORGE URIBE       1.00       1.00       0       0       0.       0.       0.		10.00			x				0.	0.	0.
TREASURER         X         0.         <		1,00			11				<b>Ŭ</b> •		<b>.</b>
(4) HOWARD GENTRY       1.00       X       0.       0			1		x				0.	0.	0.
DIRECTORX0.0.0.(5) THOMAS MCSWEENY1.00X0.0.0.DIRECTORX0.0.0.0.(6) MICHAEL SPALDING1.00X0.0.0.DIRECTORX0.0.0.0.(7) GEORGE URIBE1.000000.		1.00									
DIRECTOR         X         0. <t< td=""><td>DIRECTOR</td><td></td><td>х</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></t<>	DIRECTOR		х						0.	0.	0.
(6) MICHAEL SPALDING         1.00         X         0. </td <td>(5) THOMAS MCSWEENY</td> <td>1.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	(5) THOMAS MCSWEENY	1.00									
DIRECTOR         X         0. <t< td=""><td>DIRECTOR</td><td></td><td>Х</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></t<>	DIRECTOR		Х						0.	0.	0.
(7) GEORGE URIBE 1.00	(6) MICHAEL SPALDING	1.00									
			Х						0.	0.	0.
DIRECTOR     X     0.0.0.0.0.0.0.0.0.0.0.0.0.00.00.0000000		1.00									
	DIRECTOR	_	Х						0.	0.	0.
			-								
			1								
			1								

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Form 990 (2022)

	990 (2022) HISPANIC							-	INC.	46-41	814	168	Pa	age <b>8</b>
Par	t VII Section A. Officers, Directors, Trust	ees, Key Emp	ploye	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)				
	(A) Name and title	<b>(B)</b> Average hours per week	box, offic	not ch , unles	ss per	ition more rson is	than c s both r/trust	an	(D) Reportable compensation from	<b>(E)</b> Reportable compensatior from related	1	an	(F) timate nount o other	
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MIS( 1099-NEC)		fr org and	pensa om the anizati d relate anizatio	e ion ed
											_			
с	Subtotal Total from continuation sheets to Part VII Total (add lines 1b and 1c)	, Section A	·····						0.0.0.		0.0.0			0. 0. 0.
2	Total number of individuals (including but no compensation from the organization	ot limited to th	ose	liste	d ab	ove	) wh	o re	eceived more than \$100,	000 of reportable			Yes	0 No
3	Did the organization list any <b>former</b> officer, line 1a? <i>If "Yes," complete Schedule J for su</i> For any individual listed on line 1a, is the su	uch individual								·····		3		X
5	and related organizations greater than \$150 Did any person listed on line 1a receive or a	,000? <i>If</i> "Yes, ccrue compen	" co Isatio	<i>mple</i> on fr	ete S om a	Sche any	edule unre	J f	or such individual ed organization or indivic	lual for services		4		X
Sec	rendered to the organization? If "Yes." com tion B. Independent Contractors	plete Schedule	e J fo	or su	ich r	oers	on .					5		X
1	Complete this table for your five highest cor the organization. Report compensation for t										ensati	ion fro	om	
	(A) Name and business	address	NC	ONE	2			_	(B) Description of s	ervices	Co	(C omper	<b>;)</b> nsatior	1
2	Total number of independent contractors (ir \$100,000 of compensation from the organiz		ot lin	nited	l to I	thos C		ted	above) who received mo	ore than			000 //	

232008 12-13-22

Form	1 99C	) (2	2022) HISPANIC F2	AMI	LY FOUNDA	ATION, INC.	•	46-4181	468 Page <b>9</b>
Pa	rt V	111	Statement of Revenue						
			Check if Schedule O contains a resp	onse	or note to any lin	e in this Part VIII	(B)		
						<b>(A)</b> Total revenue	Related or exempt	( <b>C)</b> Unrelated business revenue	<b>(D)</b> Revenue excluded from tax under sections 512 - 514
ts ts	1	a	Federated campaigns 1a						
ran un:			Membership dues 1b						
°,G		с	Fundraising events 1c						
ar /		d	Related organizations 1d						
is, (		е	Government grants (contributions) 1e		4,100.				
er S S		f	All other contributions, gifts, grants, and						
Contributions, Gifts, Grants and Other Similar Amounts			similar amounts not included above 1f		281,225.				
ont nd (		-	Noncash contributions included in lines 1a-1f			285,325.			
ы С		n	Total. Add lines 1a-1f		Business Code	205,525.			
	0	2	PROGRAM INCOME		624100	43,517.	43,517.		
vice	2	a b			024100	45,517.	<u> </u>		
Ser		c							
am evel		d							
Program Service Revenue		е							
Å		f	All other program service revenue						
		g	Total. Add lines 2a-2f			43,517.			
	3		Investment income (including dividends,						
			other similar amounts)						
	4		Income from investment of tax-exempt be						
	5		Royalties		(ii) Personal				
	6	a	Gross rents 6a 5,2						
			Less: rental expenses <b>6b</b>	0.					
			Rental income or (loss) 6c 5,2						
			Net rental income or (loss)			5,286.			5,286.
	7	а	Gross amount from sales of (i) Secur	ties	(ii) Other				
			assets other than inventory <b>7a</b>						
		b	Less: cost or other basis						
evenue			and sales expenses 7b						
eve			Gain or (loss) 7c						
Other R			Net gain or (loss) Gross income from fundraising events (not						
Ę	0	a	including \$ of						
0			contributions reported on line 1c). See						
			Part IV, line 18	8a					
		b	Less: direct expenses	8b					
		с	Net income or (loss) from fundraising eve	nts					
	9	а	Gross income from gaming activities. See						
			Part IV, line 19						
			Less: direct expenses						
			Net income or (loss) from gaming activitie	»s					
	10	а	Gross sales of inventory, less returns and allowances	100	26,530.				
		b	Less: cost of goods sold						
			Net income or (loss) from sales of invento			26,530.	26,530.		
					Business Code				
ous ₂	11	а	MISCELLANEOUS		900099	566.	566.		
Miscellaneous Revenue		b							
cell leve		с							
ΩIS H			All other revenue			F 7 7			
		е	Total. Add lines 11a-11d			566. 361,224.	70,613.	0.	5,286.
	12	40	Total revenue. See instructions			JUL, 444.	10,013.	Ι Ο.	5,286. Form <b>990</b> (2022)
23200	9 12-'	13-	22						

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HISPANIC FAMILY FOUNDATION, INC.

232009 12-13-22

46-4181468 Page 9

HISPANIC FAMILY FOUNDATION, INC. Part IX Statement of Functional Expenses

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

### Check if Schedule O contains a response or note to any line in this Part IX (C) Management and general expenses (B) (D) (A) Do not include amounts reported on lines 6b, Program service expenses Total expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic 60,838. 60,838. 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 Benefits paid to or for members 4 5 Compensation of current officers, directors, trustees, and key employees Compensation not included above to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 127,917. 125,484. 2,433. Other salaries and wages 7 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 10 Payroll taxes 11 Fees for services (nonemployees): Management а 1,674. 1,674. b Legal С Accounting Lobbying d Professional fundraising services. See Part IV, line 17 е Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, g column (A), amount, list line 11g expenses on Sch 0.) Advertising and promotion 12 5,178. 1,826. 3,352. Office expenses 13 2,241. 2,241. Information technology 14 15 Royalties 21,636. 19,492. 2,144. 16 Occupancy 104. 104. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 156. 156. Conferences, conventions, and meetings 19 20 Interest Payments to affiliates 21 22 Depreciation, depletion, and amortization 652. 652. 23 Insurance Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) 35,068. 35,068. COMMUNITY EVENTS EXPENS а TAXES 31,218. 31,218. b 23,151. INSTRUCTOR PROGRAM EXPE 23,151. С VOLUNTEER APPRECIATION 11,085. 11,085. d 16,471. 6,331. 10,140. All other expenses е 337,389. 273,864. 52,440. 11,085. Total functional expenses. Add lines 1 through 24e 25 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

232010 12-13-22

10 2022.05000 HISPANIC FAMILY FOUNDATIO 21933-21

Form 990 (2022)

18501106 781331 21933-21933

HISPANIC	FAMILY	FOUNDATION,	INC
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Back         Al         (B) End of year           1         Cash - non-interest bearing         1         15, 55           2         Savings and temporary cash investments         2         2           3         Piedges and grants receivable, net         3         1         1, 123, 4         1, 1, 12           4         Accounts receivable, net         1, 1, 123, 4         1, 1, 12         1, 1, 12           5         Leans and other receivables from or founder, substantial contributor, or 55% controlled entity or family member of any of these persons (as defined under section 49580(17)), and persons described in section 49580(2)(8)         6         6           7         Notes and loans receivable, net         16, 297, 8         16, 297, 8         16, 49           9         Data Land, buildings, and equipment: cost or other basis. Complete Part Vi of Schedule D         10a         59, 555.         9         9         9           10a         Land, buildings, and equipment: cost or other basis. Complete Part Vi of Schedule D         10a         45, 765.         13, 790.         10c         13, 750.         13         14         14           11         Investments - other sourtiles. See Part IV, line 11         14         14         14         14         14         14         14         14         14         14			Check if Schedule O contains a response or not	e to any	line in this Part X			
2         Savings and temporary cash investments         2           3         Piedges and grants receivable, net         3           4         Accounts receivable, net         1,123.4         1,123.4           5         Loans and ther receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entry or family member of any of these persons         5           6         Loans and other receivables from other disqualified persons (se defined under section 4958(r)(1)), and persons described in section 4958(r)(3)(8)         6         7           7         Notes and loans receivable, net         7         7         7           8         Inventories for sale oupport: cost or other basis. Complete Part VI of Schedule D         10a         59, 555.5         9           9         Leas: accumulated depreciation         11         12         11         13           11         Investments - publicy traded securities         11         13         14           11         Investments - publicy traded securities         11         13           12         Investments - publicy traded securities         11         14           13         Investments - publicy traded securities         11         12           14         Intrestments - publicy traded securities						(A)		<b>(B)</b> End of year
2         Savings and temporary cash investments         2           3         Pelogies and grants receivable, net         3           4         Accounts receivable, net         1,123.4         1,123.4           5         Loars and other receivables from other disqualified persons (as defined under section 4958(c)(3)(B)         6           6         Loars and other receivables from other disqualified persons (as defined under section 4958(c)(3)(B)         6           7         Notes and loars receivable, net         7           8         Inventories for sale or use         9           9         Prepaid expenses and deferred charges         9           10a         59,555.         10b           b Lass: accumulated depreciation         11         12           11         Investments - publicly traded securities         11           12         Investments - publicly traded securities         11           13         Investments - publicly traded securities         11           14         Intargible assets         150.15         2,11           15         Other assets. See Part IV, line 11         13         14           16         Other assets. Add lines 1 through 15 (must equal line 33)         31,360.16         49,07           16         Taccounts payable and		1	Cash - non-interest-bearing				1	15,554.
4         Accounts receivable, net         1,123.4         1,123.4           5         Loans and other receivables from any current or fomer officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons (a federal under section 4958()(1)), and persons described in section 4958()(3)(B)         5           6         Loans and other receivables from other disqualified persons (as defined under section 4958()(1)), and persons described in section 4958()(3)(B)         6           7         Notes and loans receivable, net         16,297.8         16,297.8           9         Prepaid expenses and deferred charges         9         10a         59,555.5           11         Investments - publicity traded securities         11         12           11         Investments - publicity traded securities         11         13           12         Investments - publicity traded securities         11         13           13         Investments - publicity traded securities         12         14           14         Intragible asset		2	Savings and temporary cash investments				2	
4         Accounts receivable, net         1,123.4         1,123.4           5         Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons (a field under section 4958()(1)), and persons described in section 4958(c)(3)(B)         5           6         Loans and other receivables from other disqualified persons (as defined under section 4958()(1)), and persons described in section 4958(c)(3)(B)         6           7         Notes and loans receivable, net         16,297.7           8         Investments publicity taded securities         9           10a         59,555.         13,790.10c           11         12         Investments. publicity taded securities         11           12         Investments. publicity taded securities         11           13         Investments. publicity taded securities         131,360.16           14         Intragible assets         24,171.1         17           15         Other assets. See Part IV, line 11         13         131,360.16           16         Total assets. Add lines 1: through 15 (must equal line 33)         31,360.16         49,07           17         Accounts payable and accruet expresses         24,171.1         17         -22           18         Other ass		3	Pledges and grants receivable, net				3	
5         Laas and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons         5           6         Laas and other receivables from other disqualified persons (as defined under section 4580(1)(s), and persons described in section 4958(c)(S)(B)         6           7         Notes and loans receivable, net         7           9         Prepaid expenses and deferred charges         9           10a         Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D         10a         59, 555.           11         Investments - publicly traded socurities         11         12           11         Investments - publicly traded socurities         11         12           12         Investments - publicly traded socurities         14         14           13         Investments - publicly traded socurities         150.         15         2,15           16         Total assets. Add lines 1 through 15 (must equal line 33)         31,360.         16         49,07           17         Accounts payable and accrued expenses         24,171.         17         -25           18         Deferred revenue         19         20         22         20 and account liability. Complete Part N of Schedule D         21         <		4				1,123.	4	1,123.
generation         5           controlled entity or family member of any of these persons         5           Loans and other receivables from other disqualified persons (as defined under section 4958(c)(3)(b)         6           7         Notes and loans receivable, net         7           8         Inventories for sale or use         16,297.8         16,45           9         Prepaid expenses and deferred charges         9         9           10a         Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D         10a         59,555.         13,790.10c         13,75           11         Investments - publicly traded securities         11         12         12         13           12         Investments - program-related. See Part IV, line 11         13         14         14           15         Other assets. See Part IV, line 11         13         14         14           16         Total assets 1.10         150.15         2,15         14           17         Accounts payable and accound liabilities         24,171.1         17         -25           18         Grants payable to any ot these persons         22         20         22         20.01         20         22           20         Tax-exempt bond liabilities <t< th=""><th></th><th>5</th><th></th><th></th><th></th><th></th><th></th><th></th></t<>		5						
6         Loans and other receivables from other disqualified persons (as defined under section 4958(f(1)), and persons described in section 4958(c(3)(8)         6           7         Notes and loans receivable, net         7         7           8         Inventories for sale or use         9         16, 297.8         16, 297.8         16, 45           9         Prepaid expenses and deferred charges         9         9         10         16, 297.8         16, 45           10         Land, buildings, and equipment: to sol or other basis. Complete Part VI of Schedule D         10a         59, 555.         13, 790.10c         13, 75           11         Investments - publicly traded securities         111         112         113         114         114         113           14         Intragible assets         9         31, 360.16         49, 07           15         Other assets. See Part IV, line 11         13         14         14           16         Total assets. Add lines 1 through 15 (must equal line 33)         31, 360.16         49, 07           16         Total assets. Add lines 1 through 15 (must equal line 33)         31, 360.16         49, 07           17         Accounts payable and accrued expenses         24, 171.1         17         -22           18         Grants payable and accr			trustee, key employee, creator or founder, subst	antial co	ontributor, or 35%			
get under section 4958(r)(1), and persons described in section 4958(c)(3)(8)         6           7         Notes and loans receivable, net         7           8         Investments of sale or use         9           9         Prepaid expenses and defered charges         9           9         Prepaid expenses and defered charges         9           9         Prepaid expenses and defered charges         9           10a         Lard, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D         10a         59,555.           11         Investments - publicly traded securities         11         12           11         Investments - program-related. See Part IV, line 11         13           14         Intragible assets         14         150.           15         Other assets. See Part IV, line 11         150.         16         2,15           16         Total assets. See Part IV, line 11         150.         16         2,15           16         Total assets. See Part IV, line 11         18         0         24         17         7           17         Accounts payable and accrued expenses         24 /, 171.         17         -22         18         Grants payable to any current of former officer, director, trustes, key employee, creator or former officer, director, t			controlled entity or family member of any of thes	e perso	ns		5	
gg         7         Notes and loans raceivable, net         7           8         Inventories for sale or use         16,297.8         16,297.8         16,297.8           9         Pepaid expenses and deferred charges         9         9           10a         Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D         10a         59,755.         13,790.00         10c         13,795.00           11         Investments - publicly traded securities         10a         59,755.         13,790.00         14         13,790.00         13,790.00         14,71.00         14,71.00         14         150.00         14,71.00         12,71.00 <td< th=""><th></th><th>6</th><th>Loans and other receivables from other disqualif</th><th>ied pers</th><th>sons (as defined</th><th></th><th></th><th></th></td<>		6	Loans and other receivables from other disqualif	ied pers	sons (as defined			
8         Inventories for sale or use         16, 297.         8         16, 427.         8         16, 45           9         Prepaid expenses and deferred charges         9         9           10         Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D         10a         59, 555.         9           11         Investments - buildings, and equipment: cost or other basis. Complete Part VI of Schedule D         10a         59, 555.         13, 790.         10c         13, 75           11         Investments - buildings, and equipment: cost or other basis. Complete Part VI, line 11         11         11         12           11         Investments - other securities. See Part IV, line 11         13         14         14           15         Other assets. See Part IV, line 11         13         14         14           16         Other assets. See Part IV, line 11         150.         15         2, 11           16         Total assets. Add lines 1 through 15 (must equal line 33)         31, 360.         16         49, 07           17         Accounts payable and accrued expenses         24, 171.         17         -25           18         Grants payable and accrued expenses         24         24, 9, 367.         25         26, 0, 05           21			under section 4958(f)(1)), and persons described	in sect	ion 4958(c)(3)(B)		6	
10       Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D       10       59, 555.         b       Less: accumulated depreciation       10       45, 765.       13, 790.       10c       13, 75         11       Investments - publicly traded securities       11       12       11       12         12       Investments - publicly traded securities. See Part IV, line 11       13       13       14         14       Investments - publicly traded securities. See Part IV, line 11       13       14       14         15       Other assets. See Part IV, line 11       150.       15       2,15         16       Total assets. Add lines 1 through 15 (must equal line 33)       31,360.       16       49,07         17       Accounts payable and accrued expenses       24,171.       17       -25         18       Grants payable       19       20       21         21       Escrow or custodial account itability. Complete Part IV of Schedule D       21       22         22       Lans and other payables to any current or former officer, director, trustee, kay employee, creator or founder, substantial contributor, or 35%       22         23       Secured mortgages and notes payable to unrelated third parties       29,800.       24       29,800         24	ts	7	Notes and loans receivable, net			7		
10       Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D       10       59, 555.         b       Less: accumulated depreciation       10       45, 765.       13, 790.       10c       13, 75         11       Investments. publicly traded securities       11       12       11       12         12       Investments. publicly traded securities. See Part IV, line 11       13       13       14         14       Intragible assets       14       13       14       14         15       Other assets. See Part IV, line 11       150.       15       2,15         16       Total assets. Add lines 1 through 15 (must equal line 33)       31,360.       16       49,07         17       Accounts payable and accrued expenses       24,171.       17       -25         18       Grants payable       19       20       21         21       Escrow or custodial account liability. Complete Part IV of Schedule D       21       21         22       Lans and other payables to any current or former officer, director, trustee, kay employee, creator or founder, substantial contributor, or 35%       22         23       Secured mortgages and notes payable to unrelated third parties       29,800.       24       29,800         24       Unsecured notes and	sse	8	Inventories for sale or use			16,297.	8	16,456.
basis. Complete Part VI of Schedule D         10a         59,555.           b Less: accumulated depreciation         10b         45,765.         13,790.         10c         13,790.           11         Investments - publicly traded securities.         11         12         11         12           12         Investments - other securities. See Part IV, line 11         13         14         14           13         Investments - sprogram-related. See Part IV, line 11         13         14         14           16         Total assets. See Part IV, line 11         13         14         16           16         Total assets. Add lines 1 through 15 (must equal line 33)         31,360.         16         49,07           17         Accounts payable and accrued expenses         24,171.         17         -25           18         Grants payable         18         20         21         20           20         Tax-exempt bond liabilities         20         21         20         22         23         24         19         22           21         Escrow or custodial account liability. Complete Part IV of Schedule D         21         23         24         Unsecured notes and loans payable to unrelated third parties         29,800.         24         29,800 <td< th=""><th>Ä</th><th>9</th><th>Prepaid expenses and deferred charges</th><th></th><th></th><th></th><th>9</th><th></th></td<>	Ä	9	Prepaid expenses and deferred charges				9	
11       Investments - publicly traded securities       11         12       Investments - other securities. See Part IV, line 11       12         13       Investments - program-related. See Part IV, line 11       13         14       Intargible assets       14         15       Other assets. See Part IV, line 11       150.       15       2,15         16       Total assets. Add lines 1 through 15 (must equal line 33)       31,360.       16       49,07         17       Accounts payable and accrued expenses       24,171.       17       -25         18       Grants payable       18       19         20       Tax-exempt bond liabilities       20       21         21       Escrow or custodial account liability. Complete Part IV of Schedule D       21       21         22       Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       22         23       Secured notes and loans payable to unrelated third parties       29,800.       24       29,800.         25       Other liabilities not included on lines 17-24). Complete Part X       303,338.       26       290,15         303,338.       26       290,15       303,338.       28		10a	Land, buildings, and equipment: cost or other					
11       Investments - publicly traded securities       11         12       Investments - other securities. See Part IV, line 11       12         13       Investments - program-related. See Part IV, line 11       13         14       Intargible assets       14         15       Other assets. See Part IV, line 11       150.       15       2,15         16       Total assets. Add lines 1 through 15 (must equal line 33)       31,360.       16       49,07         17       Accounts payable and accrued expenses       24,171.       17       -25         18       Grants payable       18       19         20       Tax-exempt bond liabilities       20       21         21       Escrow or custodial account liability. Complete Part IV of Schedule D       21       21         22       Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       22         23       Secured notes and loans payable to unrelated third parties       29,800.       24       29,800.         25       Other liabilities not included on lines 17-24). Complete Part X       303,338.       26       290,15         303,338.       26       290,15       303,338.       28					59,555.			
12       Investments - other securities. See Part IV, line 11       12         13       Investments - program-related. See Part IV, line 11       13         14       Intangible assets       144         15       Other assets. See Part IV, line 11       150. 15       2,15         16       Total assets. Add lines 1 through 15 (must equal line 33)       31, 360. 16       49,07         17       Accounts payable and accrued expenses       24,171. 17      25         18       Grants payable       18       19         20       Tax-exempt bond liabilities       20       21         21       Escrow or custodial account liability. Complete Part IV of Schedule D       21       22         22       Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       22         23       Secured mortgages and notes payable to unrelated third parties       29,800. 24       29,800.         24       Unsecured notes and loans payable to unrelated third parties       23.       24.       24.         24       Unsecured notes and loans payable to unrelated third parties       29,800. 24       29,800.       24       29,800.         25       Other liabilities. Not follow FASB ASC 958, check he		b	Less: accumulated depreciation	10b		13,790.	10c	13,790.
13       Investments - program-related. See Part IV, line 11       13         14       Intangible assets       14         15       Other assets. See Part IV, line 11       150.15         16       Total assets. Add lines 1 through 15 (must equal line 33)       31,360.16       49,07         17       Accounts payable and accrued expenses       24,171.17       -25         18       Grants payable       18       19         20       20       21       20         21       Escrow or custodial account liability. Complete Part IV of Schedule D       21       20         22       Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       22         23       Secured mortagages and notes payable to unrelated third parties       29,800.24       29,800         24       Unsecured notes and loans payable to unrelated third parties       23       24       249,367.25       260,65         26       Total liabilities. Add lines 17 through 25       303,338.26       290,15       290,15         27       Net assets with donor restrictions       -271,978.27       -241,12         28       Net assets with donor restrictions       28       29       29 <th></th> <th>11</th> <th></th> <th></th> <th></th> <th></th> <th>11</th> <th></th>		11					11	
14       Intangible assets       14         15       Other assets. See Part IV, line 11       150. 15       2,15         16       Total assets. Add lines 1 through 15 (must equal line 33)       31,360. 16       49,07         17       Accounts payable and accrued expenses       24,171. 17       -25         18       Grants payable       18       19         20       Tax exempt bond liabilities       20       21         21       Escrow or custodial account liability. Complete Part IV of Schedule D       21       21         22       Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       22       23         23       Secured mortgages and notes payable to unrelated third parties       29,800. 24       29,800.       24       29,800.         25       Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17:24). Complete Part X of Schedule D       20       303,338. 26       290,15         26       Total liabilities. Add lines 17 through 25       303,338. 26       290,15       303,338. 26       290,15         27       Net assets without donor restrictions       -271,978. 27       -241,12       28       28		12					12	
15 Other assets. See Part IV, line 11       150. 15       2,15         15 Other assets. Add lines 1 through 15 (must equal line 33)       31,360. 16       49,07         17 Accounts payable and accrued expenses       24,171. 17       -25         18 Grants payable       18         19         20         21         20         21         20         21         20         21         20         21         20         21         20         21         20         21         20         23         24       19         23         24       29,800. 24       29,800         24       29,800. 24       29,800         24       249,367. 25       260,65         24       249,367. 25       260,65         24        -271,978.		13					13	
16       Total assets. Add lines 1 through 15 (must equal line 33)       31,360.       16       49,07         17       Accounts payable and accrued expenses       24,171.       17       -25         18       Grants payable       19       19         20       21       Escrew or custodial account liability. Complete Part IV of Schedule D       20         21       Escrew or custodial account liability. Complete Part IV of Schedule D       21         22       Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       22         23       Secured motgages and notes payable to unrelated third parties       29,800.       24       29,800.         25       Other liabilities (including federal income tax, payables to related third parties       249,367.       25       260,65         26       Total liabilities. Add lines 17 through 25       303,338.       26       290,15         27       Net assets with donor restrictions       -271,978.       27       -241,12         28       Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.       28       0       29         29       20       29       29       29       20         29 <th></th> <th>14</th> <th></th> <th></th> <th>1.7.4</th> <th></th> <th></th>		14			1.7.4			
17       Accounts payable and accrued expenses       24,171.       17       -25         18       Grants payable       19       19         20       Tax-exempt bond liabilities       20         21       Escrow or custodial account liability. Complete Part IV of Schedule D       21         22       23       Secured mortgages and notes payable to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       22         23       Secured mortgages and notes payable to unrelated third parties       29,800.       24       29,80         24       Unsecured notes and loans payable to unrelated third parties       29,800.       24       29,80         25       Other liabilities (included on lines 17-24). Complete Part X of Schedule D       249,367.       25       260,65         26       Total liabilities. Add lines 17 through 25       303,338.       26       290,12         26       Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.       -271,978.       27       -241,12         28       Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.       28       29       29         29       Capital stock or trust principal, or current funds       29       29		15				2,150.		
18       Grants payable       18         19       Deferred revenue       19         20       Tax-exempt bond liabilities       20         21       Escrow or custodial account liability. Complete Part IV of Schedule D       21         21       Escrow or custodial account diability. Complete Part IV of Schedule D       21         22       Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       22         23       Secured mortgages and notes payable to unrelated third parties       29,800. 24       29,800.         25       Other liabilities not included on lines 17.24). Complete Part X       0       249,367. 25       260,65         26       Total liabilities. Add lines 17 through 25       303,338. 26       290,11       290,11         27       Net assets with donor restrictions       -271,978. 27       -241,12         28       Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.       28       0         29       Capital stock or trust principal, or current funds       29       29       30         30       Paid-in or capital surplus, or land, building, or equipment fund       30       31         31       Retained earnings, endowment, accum		16				49,073.		
19       Deferred revenue       19         20       Tax-exempt bond liabilities       20         21       Escrow or custodial account liability. Complete Part IV of Schedule D       21         22       Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       22         23       Secured mortgages and notes payable to unrelated third parties       23         24       Unsecured notes and loans payable to unrelated third parties       29, 800.         25       Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D       303, 338.         26       Total liabilities. Add lines 17 through 25       3003, 338.       26       290, 15         0       Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.       -271, 978.       27       -241, 12         28       Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.       28       29       29       29         29       Capital stock or trust principal, or current funds       29       29       29       29         29       Capital stock or trust principal, or current funds       30       31       31		17				24,171.		-255.
20       Tax-exempt bond liabilities       20         21       Escrow or custodial account liability. Complete Part IV of Schedule D       21         22       Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       22         23       Secured mortgages and notes payable to unrelated third parties       23         24       Unsecured notes and loans payable to unrelated third parties       29,800.       24       29,80         25       Other liabilities. Add lines 17 through 25       303,338.       26       290,15         26       Total liabilities. Add lines 17 through 25       303,338.       26       290,15         26       Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.       -271,978.       27       -241,12         28       Net assets with donor restrictions       -271,978.       27       -241,12         29       Capital stock or trust principal, or current funds       29       29       29         30       Paid-in or capital surplus, or land, building, or equipment fund       30       31         31       Total neasets or fund balances       -271,978.       32       -241,12		18						
21       Escrow or custodial account liability. Complete Part IV of Schedule D       21         22       Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       22         23       Secured mortgages and notes payable to unrelated third parties       23         24       Unsecured notes and loans payable to unrelated third parties       29,800. 24       29,800         25       Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D       249,867. 25       260,65         26       Total liabilities. Add lines 17 through 25       303,338. 26       290,155         27       Net assets without donor restrictions       -271,978. 27       -241,122         28       Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.       28       29         27       Net assets with donor restrictions       28       29       29         29       Capital stock or trust principal, or current funds       29       29       29         30       Paid-in or capital surplus, or land, building, or equipment fund       30       30       31         32       Total net assets or fund balances       -271,978. 32       -241,122 <th></th> <th></th> <td></td> <td></td> <td></td> <td></td>								
22       Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       22         23       Secured mortgages and notes payable to unrelated third parties       23         24       Unsecured notes and loans payable to unrelated third parties       29,800.       24       29,800.         25       Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D       249,367.       25       26       26       26       27       28       29,01.5       20,01.5         26       Total liabilities. Add lines 17 through 25.       303,338.       26       290,15         27       Net assets with ot donor restrictions       -271,978.       27       -241,12         28       Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.       28       29         29       Capital stock or trust principal, or current funds       29       29         29       Paid-in or capital surplus, or land, building, or equipment fund       30       31         30       Total net assets or fund balances       -271,978.       32       -241,12					Г			
Purpose       trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       22         23       Secured mortgages and notes payable to unrelated third parties       23         24       Unsecured notes and loans payable to unrelated third parties       29,800. 24       29,80         25       Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17·24). Complete Part X of Schedule D       2449,367. 25       2660,65         26       Total liabilities. Add lines 17 through 25       303,338. 26       290,15         0rganizations that follow FASB ASC 958, check here X and complete lines 27, 28, 32, and 33.       -271,978. 27       -241,12         28       Organizations that do nor restrictions       28       29         0rganizations that do nor follow FASB ASC 958, check here and complete lines 29 through 33.       29       29       29         29       Capital stock or trust principal, or current funds       29       29       29         11       Retained earnings, endowment, accumulated income, or other funds       31       31         30       31       Total net assets or fund balances       -271,978. 32       -241,12							21	
23       Secured montgages and notes payable to unrelated third parties       23         24       Unsecured notes and loans payable to unrelated third parties       29,800.24       29,80         25       Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D       249,367.25       260,65         26       Total liabilities. Add lines 17 through 25       303,338.26       290,15         Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.       -271,978.27       -241,12         28       Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.       28       29         29       Capital stock or trust principal, or current funds       29       29         30       30       30       30         31       Retained earnings, endowment, accumulated income, or other funds       31         32       Total net assets or fund balances       -271,978.32       -241,122	es	22						
23       Secured mongages and notes payable to unrelated third parties       23         24       Unsecured notes and loans payable to unrelated third parties       29,800.24       29,80         25       Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17:24). Complete Part X of Schedule D       249,367.25       260,65         26       Total liabilities. Add lines 17 through 25       303,338.26       290,15         Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.       -271,978.27       -241,12         28       Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.       28       29         29       Capital stock or trust principal, or current funds       29       29         30       Paid-in or capital surplus, or land, building, or equipment fund       30       31         31       Retained earnings, endowment, accumulated income, or other funds       31       -271,978.32       -241,12	iliti							
23       Secured mongages and notes payable to unrelated third parties       23         24       Unsecured notes and loans payable to unrelated third parties       29,800.24       29,80         25       Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17:24). Complete Part X of Schedule D       249,367.25       260,65         26       Total liabilities. Add lines 17 through 25       303,338.26       290,15         Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.       -271,978.27       -241,12         28       Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.       28       29         29       Capital stock or trust principal, or current funds       29       29         30       Paid-in or capital surplus, or land, building, or equipment fund       30       31         31       Retained earnings, endowment, accumulated income, or other funds       31       -271,978.32       -241,12	jab.				F			
25       Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D       249,367.25       260,65         26       Total liabilities. Add lines 17 through 25       303,338.26       290,15         Organizations that follow FASB ASC 958, check here X and complete lines 27, 28, 32, and 33.         27       Net assets without donor restrictions       -271,978.27       -241,12         28       Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.       28         29       Capital stock or trust principal, or current funds       29         30       Paid-in or capital surplus, or land, building, or equipment fund       30         31       Retained earnings, endowment, accumulated income, or other funds       31         32       Total net assets or fund balances       -271,978.32       -241,122					· · · · · · · · · · · · · · · · · · ·	20 000		20.000
parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D249,367.25260,6526Total liabilities. Add lines 17 through 25303,338.26290,15Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33271,978.27-241,1228Net assets with donor restrictions2828Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.292929Capital stock or trust principal, or current funds2930Paid-in or capital surplus, or land, building, or equipment fund3031Retained earnings, endowment, accumulated income, or other funds3132Total net assets or fund balances-271,978.32-241,12						29,800.	24	29,800.
of Schedule D249,367. 25260,6526 Total liabilities. Add lines 17 through 25303,338. 26290,15Organizations that follow FASB ASC 958, check hereXand complete lines 27, 28, 32, and 33.27Net assets without donor restrictions28282928Organizations that do not follow FASB ASC 958, check hereand complete lines 29 through 33.29292930Paid-in or capital surplus, or land, building, or equipment fund30Paid-in or capital surplus, or land, building, or equipment fund31Retained earnings, endowment, accumulated income, or other funds31Total net assets or fund balances-271, 978. 32-271, 978. 32-271, 978. 32		25						
26       Total liabilities. Add lines 17 through 25       303,338.26       290,159         Organizations that follow FASB ASC 958, check here       X       -271,978.27       -241,12         and complete lines 27, 28, 32, and 33.       -271,978.27       -241,12         28       Organizations that do not follow FASB ASC 958, check here       28         0       Organizations that do not follow FASB ASC 958, check here       28         0       Organizations that do not follow FASB ASC 958, check here       28         0       Organizations that do not follow FASB ASC 958, check here       29         30       Paid-in or capital stock or trust principal, or current funds       29         30       Paid-in or capital surplus, or land, building, or equipment fund       30         31       Retained earnings, endowment, accumulated income, or other funds       31         32       Total net assets or fund balances       -271,978.32       -241,122					·	2/0 367	05	260 652
September       Organizations that follow FASB ASC 958, check here       X       Image: Complete lines 27, 28, 32, and 33.         27       Net assets without donor restrictions       -271, 978.       27       -241, 12         28       Net assets with donor restrictions       28       28         Organizations that do not follow FASB ASC 958, check here       28       28         Organizations that do not follow FASB ASC 958, check here       28         and complete lines 29 through 33.       29       Capital stock or trust principal, or current funds       29         30       Paid-in or capital surplus, or land, building, or equipment fund       30       31         31       Retained earnings, endowment, accumulated income, or other funds       31       27         32       Total net assets or fund balances       -271, 978.       32       -241, 12		00						
and complete lines 27, 28, 32, and 33.         27       Net assets without donor restrictions         28       -271, 978.         27       -241, 12         28       -271, 978.         29       -271, 978.         29       -29         30       -29         31       -271, 978.         32       Total net assets or fund balances		20				505,550.	20	290,197.
27       Net assets without donor restrictions       -271,978.27       -241,12         28       Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.       28         29       Capital stock or trust principal, or current funds       29         30       30       30         31       Retained earnings, endowment, accumulated income, or other funds       31         32       Total net assets or fund balances       -271,978.32       -241,12         33       Total liabilities and net assets/fund balances       31       360       29	ŝ		,	ck nere				
27       Net assets with our durit restrictions       27       27       241, 12         28       Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.       28       29         29       Capital stock or trust principal, or current funds       29       29         30       Paid-in or capital surplus, or land, building, or equipment fund       30         31       Retained earnings, endowment, accumulated income, or other funds       31         32       Total net assets or fund balances       -271, 978.       32       -241, 12	nce	27				-271 978.	27	-241 124.
Vert assets with out of restrictions       28         Organizations that do not follow FASB ASC 958, check here       1         and complete lines 29 through 33.       29         29       Capital stock or trust principal, or current funds       29         30       31         31       360       31         32       Total net assets or fund balances       31         33       Total liabilities and net assets/fund balances       31	ala					271,570.		
and complete lines 29 through 33.       29         29       Capital stock or trust principal, or current funds         30       29         31       Retained earnings, endowment, accumulated income, or other funds         32       Total net assets or fund balances         33       Total liabilities and net assets/fund balances         34       Total liabilities and net assets/fund balances	Б	20					20	
29       Capital stock or trust principal, or current funds       29         30       Paid-in or capital surplus, or land, building, or equipment fund       30         31       Retained earnings, endowment, accumulated income, or other funds       31         32       Total net assets or fund balances       -271,978.32       -241,12         33       Total liabilities and net assets/fund balances       31       360,122       49,07	Fun		-	, cne				
30       Paid-in or capital surplus, or land, building, or equipment fund       30         31       Retained earnings, endowment, accumulated income, or other funds       31         32       Total net assets or fund balances       -271,978.32         33       Total liabilities and net assets/fund balances       31	p	29				29		
31       Retained earnings, endowment, accumulated income, or other funds       31         32       Total net assets or fund balances       -271,978.32         33       Total liabilities and net assets/fund balances       31	ets							· · · · · · · · · · · · · · · · · · ·
$ \frac{1}{2}  \frac{3}{32}  \text{Total net assets or fund balances}  \frac{1}{32}  1$	Ass							· · · · · · · · · · · · · · · · · · ·
Z 33 Total liabilities and net assets/fund balances $31 360 22 49 05$	let /					-271,978.		-241,124.
	z	33				31,360.	33	49,073.
					I			Form <b>990</b> (2022)

Form 990 (2022)
Part X Balance Sheet

	1990 (2022) HISPANIC FAMILY FOUNDATION, INC.	46-418	1468	Page	12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			[	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,224	
2	Total expenses (must equal Part IX, column (A), line 25)	2		, 389	
3	Revenue less expenses. Subtract line 2 from line 1	3		,835	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	-271	.,978	•
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		<u>,019</u>	•
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	-241	.,124	•
Ра	rt XII Financial Statements and Reporting			_	_
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes N	<u> </u>
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	• O.			-
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X	<u> </u>
	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	X	<u> </u>
	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:				
	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		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				-
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a	<u> </u>	<u>`</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	<b>990</b> (20)	
			<b>—</b> • • • • • •		$\sim \sim$

Form **990** (2022)

232012 12-13-22

SCH	EDU	LE	Α

30			Public Charity Status and Public Support									
(For	m 99	0)	Complete if the organization is a section 501(c)(3) organization or a section		2022							
			4947(a)(1) nonexempt charitable trust.	ſ	LULL							
		the Treasury ue Service	Attach to Form 990 or Form 990-EZ.		Open to Public Inspection							
		he organizati	Go to www.irs.gov/Form990 for instructions and the latest information.	Employer	identification number							
Nam	e 01 l	ne organizatio	HISPANIC FAMILY FOUNDATION, INC.		6-4181468							
Pa	t I	Reason	for Public Charity Status. (All organizations must complete this part.) See instruction		5-4101400							
				<u>.</u>								
1 <b>1</b>	Jigani D		private foundation because it is: (For lines 1 through 12, check only one box.)									
2			<pre>ivention of churches, or association of churches described in section 170(b)(1)(A)(i).</pre>									
-												
3 4		-	a cooperative hospital service organization described in section 170(b)(1)(A)(iii).	Viiii) Entord	the hospital's name							
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:										
5		An organizati	on operated for the benefit of a college or university owned or operated by a governmental u	nit describe	d in							
		section 170	b)(1)(A)(iv). (Complete Part II.)									
6		A federal, sta	te, or local government or governmental unit described in section 170(b)(1)(A)(v).									
7	X	An organizati	on that normally receives a substantial part of its support from a governmental unit or from th	ne general p	ublic described in							
		section 170(I	<b>b)(1)(A)(vi).</b> (Complete Part II.)									
8		A community	trust described in section 170(b)(1)(A)(vi). (Complete Part II.)									
9		An agricultura	Il research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a	land-grant of	college							
		or university of	or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of	the college	or							
		university:										
10			on that normally receives (1) more than 33 1/3% of its support from contributions, membersh									
			ed to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of it		-							
			nrelated business taxable income (less section 511 tax) from businesses acquired by the org	janization af	ter June 30, 1975.							
			509(a)(2). (Complete Part III.)									
11		-	on organized and operated exclusively to test for public safety. See section 509(a)(4).									
12		-	on organized and operated exclusively for the benefit of, to perform the functions of, or to ca		-							
			supported organizations described in section 509(a)(1) or section 509(a)(2). See section s		heck the box on							
		7	ugh 12d that describes the type of supporting organization and complete lines 12e, 12f, and	-								
а			upporting organization operated, supervised, or controlled by its supported organization(s), ty		-							
			ed organization(s) the power to regularly appoint or elect a majority of the directors or truster	es of the su	pporting							
		-	n. You must complete Part IV, Sections A and B.									
b			upporting organization supervised or controlled in connection with its supported organizatio		-							
			nanagement of the supporting organization vested in the same persons that control or management	je the supp	orted							
		٦ Ŭ	n(s). You must complete Part IV, Sections A and C.									
С			ctionally integrated. A supporting organization operated in connection with, and functional	ly integrated	d with,							
	_	۰. ۲	ed organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.									
d			n-functionally integrated. A supporting organization operated in connection with its suppor	v								
			unctionally integrated. The organization generally must satisfy a distribution requirement and	an attentiv	eness							
_		- -	t (see instructions). You must complete Part IV, Sections A and D, and Part V.	II. True - III								
е	L		box if the organization received a written determination from the IRS that it is a Type I, Type	ii, iype iil								
,	East -	-	integrated, or Type III non-functionally integrated supporting organization.		[]							
т	- nte	r ine numper (	of supported organizations		1							

Т

OMB No. 1545-0047

Enter the number of supported f

g Provide the following information	n about the supporte	d 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	Yes	No	support (see instructions)	support (see instructions)
		above (see instructions))	100	110		
Total						

## Schedule A (Form 990) 2022 Part II Support Sch

HISPANIC FAMILY FOUNDATION, INC.

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

Sec	ection A. Public Support										
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	<b>(c)</b> 2020	<b>(d)</b> 2021	(e) 2022	(f) Total				
1	Gifts, grants, contributions, and										
	membership fees received. (Do not										
	include any "unusual grants.")	287,408.	136,025.	108,824.	203,432.	285,325.	1021014.				
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	287,408.	136,025.	108,824.	203,432.	285,325.	1021014.				
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,						1 4 9 9 9 5				
	column (f)						<u>142,005.</u> 879,009.				
	Public support. Subtract line 5 from line 4.						879,009.				
	ction B. Total Support										
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total				
-	Amounts from line 4	287,408.	136,025.	108,824.	203,432.	285,325.	1021014.				
8	Gross income from interest,										
	dividends, payments received on										
	securities loans, rents, royalties,				0 400	F 20C	10 710				
	and income from similar sources				8,426.	5,286.	13,712.				
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			E 200		566.	F 775				
	assets (Explain in Part VI.)			5,209.		500.	<u>5,775.</u> 1040501.				
	Total support. Add lines 7 through 10					40	106,718.				
	Gross receipts from related activities,						100,710.				
13	First 5 years. If the Form 990 is for the										
Sec	organization, check this box and stor ction C. Computation of Publi						·····				
	Public support percentage for 2022 (I		-	column (f))		14	84.48 %				
	Public support percentage from 2021					15	73.06 %				
	33 1/3% support test - 2022. If the o										
	stop here. The organization qualifies						V				
b			•								
	<b>b</b> 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization										
17a	<b>7a 10% -facts-and-circumstances test - 2022.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,										
	and if the organization meets the fact										
	meets the facts-and-circumstances te			-	achien	-					
h	10% -facts-and-circumstances test	0	•		•	7a, and line 15 is <sup>-</sup>					
		-									
	more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization										
18	Private foundation. If the organization		-		• •						
	···· ··· ··· ··· ··· ··· ··· ··· ··· ·		,	, , <u></u> , , <b>-</b> , <b>-</b> , <b>-</b> ,	,		(Form 990) 2022				

232022 12-09-22

	(Complete only if you checked	the box on line 10	) of Part I or if the o	organization failed	to qualify under P	art II. If the organiz	ation fails to		
_	qualify under the tests listed b	elow, please comp	olete Part II.)						
	ction A. Public Support								
	endar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total		
٦	Gifts, grants, contributions, and membership fees received. (Do not								
	include any "unusual grants.")								
2	Gross receipts from admissions,								
2	merchandise sold or services per-								
	formed, or facilities furnished in								
	any activity that is related to the organization's tax-exempt purpose								
3	Gross receipts from activities that								
	are not an unrelated trade or bus-								
	iness under section 513								
4	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf								
5	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge								
6	Total. Add lines 1 through 5								
7:	a Amounts included on lines 1, 2, and								
_	3 received from disqualified persons								
	Amounts included on lines 2 and 3 received from other than disqualified persons that								
	exceed the greater of \$5,000 or 1% of the								
	amount on line 13 for the year								
	c Add lines 7a and 7b								
	Public support. (Subtract line 7c from line 6.) ction B. Total Support								
		(-) 0010	(1-) 0010	(-) 0000	(4) 0001	(-) 0000	(6) Tatal		
	endar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total		
	Amounts from line 6 a Gross income from interest,								
104	dividends, payments received on								
	securities loans, rents, royalties, and income from similar sources								
	Durrelated business taxable income								
	(less section 511 taxes) from businesses								
	acquired after June 20 1075								
	c 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.)					1			
	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 5	501(c)(3) organizatio	on,		
	check this box and <b>stop here</b>	-			-				
Se	ction C. Computation of Publi	c Support Per	rcentage						
15	Public support percentage for 2022 (I	ine 8, column (f), d	livided by line 13, o	column (f))		15	%		
16						16	%		
Se	ction D. Computation of Inves	tment Income	e Percentage						
17	17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))       17         %								
18									
19	19a 33 1/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not								
	more than 33 1/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization								
I	o 33 1/3% support tests - 2021. If the	•			-				
	line 18 is not more than 33 1/3%, che								
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check th	his box and see ins				
2320	23 12-09-22		15			Schedule A	(Form 990) 2022		
			10						

18501106 781331 21933-21933

HISPANIC FAMILY FOUNDATION, INC.

1

Yes No

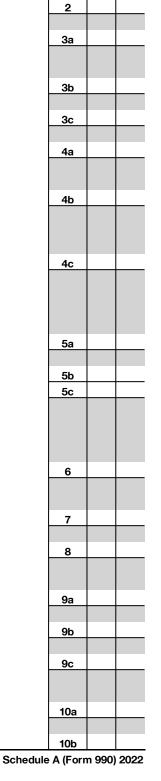
### Part IV | Supporting Organizations

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

### Section A. All Supporting Organizations

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

232024 12-09-22



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## Schedule A (Form 990) 2022 HISPANIC FAMILY FOUNDATION, INC.

Yes No

1

IЧ			
		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and		
	11c below, the governing body of a supported organization? 11a		
b	A family member of a person described on line 11a above? 11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide		
	detail in Part VI. 11c		
Sec	tion B. Type I Supporting Organizations		
		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
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. 2		
Sec	tion C. Type II Supporting Organizations		

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).

Section D	6. 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

1	Check the box next to the method	that the organization used to	satisfy the Integral Part 1	Test during the year	(see instructions).
•	CHECK THE DOX HEAT TO THE HIELITOU		salisiy line initegral i art i	csi uunny inc ycar	1000 1100 0000

a The organization satisfied the Activities Test. Complete line 2 below.

b		The organization is t	he parent of each	of its supported	organizations.	Complete line 3 below.
---	--	-----------------------	-------------------	------------------	----------------	------------------------

С		The organization s	supported a governi	mental entity.	Describe in Pa	rt VI how y	ou supported a	governmental entity	(see instruction <u>s).</u>
---	--	--------------------	---------------------	----------------	----------------	-------------	----------------	---------------------	-----------------------------

17

- 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.* 

Schedule A (Form 990) 2022

232025 12-09-22

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1	Check here if the organization satisfied the Integral Part Test as a qualifyi All other Type III non-functionally integrated supporting organizations must		•	Part VI). See instructions.
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		

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

Schedule A (Form 990) 2022

232026 12-09-22

 Schedule A (Form 990) 2022
 HISPANIC FAMILY FOUNDATION, INC.

 Part V
 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

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	(Form 990) 20			Y FOUNDATION , )(3) Supporting Orga	
Part V		on-Functionaliv in	tearatea Susia	1(3) Supporting Ora	anizations /c

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Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continu	ıed)		
Secti	on D - Distributions		·		Current Year	
1	Amounts paid to supported organizations to accomplish exe		1			
2	Amounts paid to perform activity that directly furthers exemp					
	organizations, in excess of income from activity		2			
3	Administrative expenses paid to accomplish exempt purpose	6	3			
4	Amounts paid to acquire exempt-use assets		4			
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5		
6	Other distributions (describe in Part VI). See instructions.			6		
7	Total annual distributions. Add lines 1 through 6.			7		
8	Distributions to attentive supported organizations to which the	ne organization is responsive				
	(provide details in Part VI). See instructions.			8		
9	Distributable amount for 2022 from Section C, line 6			9		
10	Line 8 amount divided by line 9 amount	1	1	10		
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2022	ıs	(iii) Distributable Amount for 2022	
1	Distributable amount for 2022 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2022 (reason-					
	able cause required - explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2022					
a	From 2017					
b	From 2018					
C	From 2019					
d	From 2020					
e	From 2021					
f	Total of lines 3a through 3e					
g	Applied to underdistributions of prior years					
h	Applied to 2022 distributable amount					
i	Carryover from 2017 not applied (see instructions)					
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2022 from Section D,					
	line 7: \$					
	Applied to underdistributions of prior years					
	Applied to 2022 distributable amount					
	Remainder. Subtract lines 4a and 4b from line 4.					
5	Remaining underdistributions for years prior to 2022, if					
	any. Subtract lines 3g and 4a from line 2. For result greater					
	than zero, explain in Part VI. See instructions.					
6	Remaining underdistributions for 2022. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, <i>explain in</i>					
7	Part VI. See instructions.					
7	Excess distributions carryover to 2023. Add lines 3j					
<u>_</u>	and 4c. Breakdown of line 7:					
8	Excess from 2018					
	Excess from 2019					
	Excess from 2020					
	Excess from 2021					
	Excess from 2022					

Schedule A (Form 990) 2022

232028 12-09-22	2			20		Schedule A (Form 990) 2022
	line 1; Part IV, Section	D, lines 2 and 3; Part	IV, Section E,	lines 1c, 2a, 2b, 3a, a	nd 3b; Part V, line '	1; Part V, Section B, line 1e; Part V, additional information.
Part VI	Supplemental Infe Part IV. Section A. lines	ormation. Provide s 1, 2, 3b, 3c, 4b, 4c.	the explanatio	ons required by Part II 9c. 11a. 11b. and 11c	, line 10; Part II, line : Part IV. Section B	e 17a or 17b; Part III, line 12; 3. lines 1 and 2: Part IV. Section C.
Schedule A (	Form 990) 2022	HISPANTC	FAMTLY	FOUNDATION	. INC.	46-4181468 Page 8

(Form 990)	Attach to
Department of the Treasury	Go to www.irs.gov
Internal Revenue Service	

Name of the organization

Schedule B

### \*\* PUBLIC DISCLOSURE COPY

### Schedule of Contributors

Attach to Form 990 or Form 990-PF. v/Form990 for the latest information. OMB No. 1545-0047

## 2022

Employer identification number

	HISPANIC FAMILY FOUNDATION, INC.	46-4181468
Organization type (che	eck one):	
Filers of:	Section:	
Form 990 or 990-EZ	X 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	
, ,	ion is covered by the General Rule or a Special Rule.	
Note: Only a section 50	)1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special R	ule. 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 \_\_\_\_\_\_\$

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

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

Schedule B (Form 990) (2022)

HISPANIC FAMILY FOUNDATION, INC.

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Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if additional space is needed.						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
1	, , , , , , , , , , , , , , , , ,	\$48,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
2		\$12,000.	Person     X       Payroll				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
3		\$9,997.	Person     X       Payroll				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
4		\$15,000.	Person     X       Payroll				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
5		\$7,630.	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				
6		\$ <u>15,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)				
223452 11-15	-22		Schedule B (Form 990) (2022)				

Employer identification number

46 - 4181468

223452 11-15-22

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HISPANIC FAMILY FOUNDATION, INC.

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

 (a)
 (b)
 (c)

 Number of the state of the state

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
<u> </u>		\$30,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
<u>    8                                </u>		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)

Employer identification number

46 - 4181468

		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. irom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. irom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

### HISPANIC FAMILY FOUNDATION, INC.

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

Schedule B (Form 990) (2022)

Name of organization

(a)

No.

from

Part I

(b)

Description of noncash property given

Employer identification number

(d)

**Date received** 

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(c)

FMV (or estimate)

(See instructions.)

Page 3

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	3 (Form 990) (2022)		Page <b>4</b>
Name of or	ganization		Employer identification number
HISPAN	IC FAMILY FOUNDATION, 1	INC.	46-4181468
Part III	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a)	ons to organizations described in sec through (e) and the following line entry haritable, etc., contributions of \$1,000 or le	tion 501(c)(7), (8), or (10) that total more than \$1,000 for the year
(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, ar	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, ar	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, ar	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, ar	nd ZIP + 4	Relationship of transferor to transferee
223454 11-15-			Schedule B (Form 990) (2022)

<sup>25</sup> 2022.05000 HISPANIC FAMILY FOUNDATIO 21933-21

(Form	990)
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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.

**Open to Public** Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

**T N T** 

Employer identification number

	HISPANIC FAMILY FOU			46-4181468
Par			or Accoun	Its. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin			
		(a) Donor advised funds	<b>(b)</b> Fun	ds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advise	d funds	
	are the organization's property, subject to the organization's	exclusive legal control?		Yes No
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?		•	Yes No
Par	t II Conservation Easements. Complete if the org			
1	Purpose(s) of conservation easements held by the organization		ure rv, into r.	
•	Preservation of land for public use (for example, recreat		historically	important land area
	Protection of natural habitat	Preservation of a	-	
	Preservation of open space			
0		ind concernation contribution in the form o	faanaaria	tion accoment on the last
2	Complete lines 2a through 2d if the organization held a qualif day of the tax year.	led conservation contribution in the form o	r a conserva	Held at the End of the Tax Year
_			0	
-				
b				
С	Number of conservation easements on a certified historic stru		<u>2c</u>	
d	Number of conservation easements included in (c) acquired a			
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the o	organization	during the tax
	year			
4	Number of states where property subject to conservation eas	ement is located		
5	Does the organization have a written policy regarding the per	iodic monitoring, inspection, handling of		
	violations, and enforcement of the conservation easements it	holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conse	rvation ease	ments during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conservation	on easement	ts during the year
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h	)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			Yes 🗌 No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense s	tatement and	d
	balance sheet, and include, if applicable, the text of the footn	ote to the organization's financial statemer	nts that desc	ribes the
	organization's accounting for conservation easements.			
Par	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Oth	er Simila	r Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue statement an	d balance sh	neet works
	of art, historical treasures, or other similar assets held for pub	lic exhibition, education, or research in fur	therance of p	oublic
	service, provide in Part XIII the text of the footnote to its finan	, ,	•	
b	If the organization elected, as permitted under FASB ASC 95			works of
	art, historical treasures, or other similar assets held for public			
	provide the following amounts relating to these items:			
				¢
				\$ \$
0		acurac, or other similar access for financial	noin provid-	\$
2	If the organization received or held works of art, historical treating the following amounts required to be reported under FASP A		yain, 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			\$ O a haraka ka D (E away 000) 0000
LHA	For Paperwork Reduction Act Notice, see the Instructions	s for Form 990.		Schedule D (Form 990) 2022

232051 09-01-22 18501106 781331 21933-21933

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2022.05000	HISPANIC	FAMILY	FOUNDATIO	21933-21

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PartILI       Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (contrued)         3       Using the organization's accession, and other records, check any of the following that make significant use of its collection there (check all that apply): <ul> <li>a</li> <li>Public exhibition</li> <li>d</li> <li>Lacan or exchange program</li> <li>a</li> <li>b</li> <li>Check and the organization's accession of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.</li> </ul> <li>During the year, did the organization is collections and explain how they further the organization's collection?</li> <li>Ves</li> <li>No</li> <li>PartIL Escrow and Custodial Arrangements. Complete the full check and the assets not included on from 590, Part X, Ine 21.</li> <li>Ta Is the organization includes an amount for from 590, Part X, Ine 21.</li> <li>Ta Is the organization includes an amount on from 590, Part X, Ine 21.</li> <li>Ta Is the organization includes an amount on form 590, Part X, Ine 21.</li> <li>Ta Is the organization includes an amount on form 590, Part X, Ine 21.</li> <li>Ta Is the organization includes an amount on form 590, Part X, Ine 21.</li> <li>Ta Is the organization includes an amount on form 590, Part X, Ine 21.</li> <li>Ta Is the organization includes an amount on form 590, Part X, Ine 21.</li> <li>Ta Is the organization includes an amount on form 590, Part X, Ine 21.</li> <li>The organization includes an amount on form 590, Part X, Ine 21.</li> <li>Ta Is the organization includes an amount on form 590, Part X, Ine 21.</li> <li>The organization includes an amount on form 590, Part X, Ine 21.</li> <li>The organization includes an amount on f</li>	Sche		C FAMILY FO					46-41	8146	8 P	age <b>2</b>
collection terms (check all that apply): <ul> <li>Collection terms (check all that apply):</li> <li>Scholarly research</li> <li>Other</li> </ul> Provide a control truture generations           Provide a control truture generations           Provide a control truture generations of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.           During the year, did the organization's collections and explain how they further the organization's exempt purpose in Part XIII.           Part W         Escrow and CutSocial Arrangements. Complete if the organization's collection?           Yes         No           Dif Yes         Yes           No         Dif Yes           Dif Yes	Par	t III   Organizations Maintaining C	ollections of Ar	t, Historica	l Treasures,	or Othe	er Simila	r Assets	contii	nued)	
a       Public exhibition       d       Can or exchange program         b       Scholary research       e       Other	3	Using the organization's acquisition, accessi	on, and other record	s, check any c	f the following t	hat make s	significant	use of its			
b       Scholary research       e       Other         2       Preservation for future generations         4       Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.         5       During the year, did the organization solic or receive donations of art, historical treasures, or other similar assets       to be side the organization answered 'Yes' on Form 990, Part X, line 9, or respondent answered 'Nes' on Form 990, Part X, line 9, or respondent answered in Form 990, Part X, line 21, line 21, line 21, line 21, for escrew and custodial and control for form 990, Part X, line 21, for escrew and custodial account liability?         1a       Is the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability?       Yes       No         b       If 'Yes', explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.       The test organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability?       Yes       No         b       If 'Yes', explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.       The test organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability?       Yes       No         b       Contributions       Inter organization include an amount on Form 990, Part X, line 10.       Inter organization include an amount on Form 990, Part X, line 10.         Farety       Ending balance       <		collection items (check all that apply):									
c Preservation for future generations   4 Provide a description of the organization's collections and explain how they three the organization's exempt purpose in Part XIII.   5 During the year, did the organization's collections and explain how they three the organization's exempt purpose in Part XIII.   5 During the year, did the organization's collection?   6 Perr VI   7 Perr VI   7 Perr VI   7 Perr VI   8 Sector wand Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part K, line 91.   7 9   9 Pres, "kapping the set of the organization and the present set of included on Form 990, Part X, line 21.   9 1   9 1   9 1   9 0   9 0   9 1   9 0   9 1   9 1   9 0   9 1   9	а	Public exhibition	c	l 📃 Loan	or exchange pro	ogram					
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.     During the year, did the organization is collection?     Part W Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 980, Part X, line 9, or responde an amount on Form 980, Part X, line 21.     Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included     on Form 980, Part X?     Segmining balance         Amount         to         d Additions during the year         defining balance         defining balance	b	b Scholarly research									
5       During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets       Ives       No         Part IV       Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.       Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.       Ives       No         6       Big the organization and expert trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.       Amount       Ite       Ite<	с	Preservation for future generations									
To be sold to raise funds rather than to be maintained as part of the organization aclosection?         Yes         No.           Part IV         Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.         Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.         Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.         Is the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?         Is the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?         Is the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?         Is the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?         Is the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?         Is the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability?         Is the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability?         Is the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability?           Part V         Endowment Funds. Complete if the organization answered Yes' on Form 990, Part X, line 10.         Is daria to scholarships         Is daria to scholarships         Is daria to scholarships         Is daria to scho	4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.									
Part IV       Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.         1a       Is the organization an agent, trustee, custodial ar other intermediary for contributions or other assets not included on Form 990, Part X is explain the arrangement in Part XIII and complete the following table:       Image: Complete the following table:         c       Beginning balance       Image: Complete the following table:       Amount         c       Beginning balance       Image: Complete the following table:       Amount         d       Additions during the year       Image: Complete the following table:       Amount         d       Additions during the year       Image: Complete the organization answered "Yes" on Form 900, Part X, line 21, for escrow or custodial account liability?       Ves       No         D       If "Yes." explain the arrangement in Part XIII. Check here if the explanation naswered "Yes" on Form 900, Part X, line 10.       Image: Complete the organization answered "Yes" on Form 900, Part X, line 10.         Part V       Endowment Funds. Complete if the organization answered "Yes" on Form 900, Part X, line 21.       Image: Complete the organization answered "Yes" on Form 900, Part X, line 10.         1a       Beginning of year balance       Image: Complete if the organization answered "Yes" on Form 900, Part X, line 10.       Image: Complete if the organization answered "Yes" on Form 900, Part X, line 10.         2	5	During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets									
reported an amount on Form 990, Part X, line 21.         1a       Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?       Ves       No         b       If "Yes." explain the arrangement in Part XIII and complete the following table:       Amount       10<	_								_		No
1a       Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X7       Ves       No         b       If 'Yes,'' explain the arrangement in Part XIII and complete the following table:       Amount       Amount         c       Beginning balance       1a       Image: Complete the sequence on the assets not included       Amount         1d       Image: Complete the sequence on the assets on the assets on the assets on the assets on the asset o	Par			ete if the orgar	nization answere	ed "Yes" o	n Form 990	), Part IV,	line 9, or		
on Form 990, Part X?       Yes       No         b       If "Yes," explain the arrangement in Part XIII and complete the following table:       Amount         c       Beginning balance       1d         d       Additions during the year       1d         d       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Yes       No         b       If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.       Yes       No         b       If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.       Yes       No         Part V       Endowment Funds. Complete if the organization answered "Yes" on Form 980, Part IV, line 10.       Immediate provide the arrangement in Part XIII. Check here if the explanation has been provided on Part IV.       Immediate provide the organization answered "Yes" on Form 980, Part IV.       Immediate part XIII.         Part V       Endowment Funds.       Complete if the organization answered "Yes" on Form 980, Part IV.       Immediate part XIII.       Immediate part XIII.         1a       Beginning of year balance       (a) Current year (b) Prior year (c) Two years back (d) Three years back for the organization set and programs       Immediate part XIII.       Immediate part XIII.       Immediate part XIII.       Immediate part XIIII.       Immediate part XIII.       Immedi											
b       If "Yes," explain the arrangement in Part XIII and complete the following table:          Amount          c       Beginning balance          1d          d       Additions during the year          1e          1       Image: Statistic Statiste Statiste Statistic Statististic Statistic Statistic	<b>1</b> a								-		-
c       Beginning balance       Id         d       Additions during the year       Id         e       Distributions during the year       Id         f       Ending balance       If         2       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Yes       No         b       If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII       Im       Im         Part V       Endowment Funds. Complete if the organization answered Yes" on Form 990, Part X, line 10.       Im       Im       Im         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (e) Four years back         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (e) Four years back         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (e) Four years back         1b       Contributions       (a) Current year       (b) Prior year       (c) Two years back       (e) Four years back         1b       Contributions       (a) Current year       (b) Prior year       (c) Two years back       (e) Four years         1b       Administrative expen								L	Yes		No
c       Beginning balance       Id         d       Additions during the year       Id         d       Distributions during the year       Id         f       Ending balance       If         2a       Distributions during the year       If         1d       Id       If         2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial accounti liability?       Yes       No         b       If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII       Image: State of St	b	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing table:					<b>A</b>		
d Additions during the year       id         e Distributions during the year       id         f Ending balance       if         2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Yes       No         b If 'Yes,'' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII       Part V       Endowment FundS. Complete if the explanation answered 'Yes' on Form 990, Part V, line 10.         Part V       Endowment FundS. Complete if the organization answered 'Yes' on Form 990, Part V, line 10.       (e) Four years back       (e) Four years back         1a Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (e) Four years back         1a Grants or scholarships       (a) Current year       (b) Prior year       (c) Two years back       (e) Four years back         c Other expenditures for facilities       and programs       (b) Prior year       (c) Two years back       (e) Four years back         2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       a Board designated or quasi-endowment       %         5 Permanent endowment       %       %       The percentages on lines 2a, 2b, and 2c should equal 100%.       3a Are there endowment funds not in the possession of the organization that are held and administered for the organizations       3a(0)       3a(0)									Amoun	τ	
e       Distributions during the year       1e         f       Ending balance       1f         2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Yes       No         Part V       Endowment Funds. Complete if the organization naswered 'Yes' on Form 990, Part IV, line 10.       Image: Complete if the organization answered 'Yes' on Form 990, Part IV, line 10.         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         b       Contributions       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         a       Beginning of year balance       (a) Current year       (c) Two years back       (d) Three years back       (e) Four years back         b       Contributions       (c) Two years back       (d) Three years back       (e) Four years back         c       Other expenditures for facilities       (a) Image: complete if the organization back       (e) Four years back         c       Other expenditures for facilities       (a) Image: complete if the organization back       (e) Administrative expenses         g       End of year balance       (f) Administrative expenses       (f) Administrative expenses       (f) Administrative											
f       Ending balance       17         2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Ves       No         b       ft "Yes", explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XII       Image: Complete if the organization answered "Yes" on Form 990, Part IV, line 10.         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         b       Contributions       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         c       Net investment earnings, gains, and losses       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         d       Grants or scholarships       (a) Current year end balance (line 1g, column (a) held as:       (a) Generatege on line again-endowment       %         f       Administrative expenditures for facilities       (a) Current year end balance (line 1g, column (a) held as:       (a) Generatege on gain-endowment       %         f       Pervide the estimated percentage of the current year end balance (line 1g, column (a) held as:       (a) Generatege on file again-endowment       %         f       Perovide the estimated percentage of the current y											
2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Yes       No         b       If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII       Yes       No         Part V       Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part X, line 10.       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         1a       Contributions       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         a       Contributions       (a) Carrent year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years         a       Contributions       (a) Carrent year       (b) Prior year       (c) Two years back       (e) Four years       (a) Carrent years       (b) Prior year       (c) Two years back       Provide the setimated percentage of the current years       (f) Prior year<	e										
b       If Yes,* explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.         Part V       Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10.         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         1a       Beginning of year balance       (b) Contributions       (c) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         a       Contributions       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         a       Contributions       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         a       Contributions       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         a       Contributions       (c) Controbutions       (c) Provide the astimated percentage of the current year end balance (line 1g, column (a)) held as:       (c) Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       (c) Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       (c) Provide the estimated percentage of the organization that are held and administered for the organization by:       (f) Horeited organizations	T Oo										
Part V       Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         6       Other expenditures for facilities       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         6       Other expenditures for facilities       (a) Current year       (b) Prior year       (c) Two years back       (c) Two years back       (e) Four years back         6       Other expenditures for facilities       (a) Current year       (b) Prior year       (c) Two years back       (c) Two years back back       (c) Two years back       (c) Two years back		•						∟			] <b>INO</b> ]
(a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         b       Contributions       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         b       Contributions       (a) Current year       (b) Prior year       (c) Two years back       (e) Four years back         b       Contributions       (a) Current year       (b) Prior year       (c) Two years back       (e) Four years back         b       Contributions       (c) Two years back       (d) Three years back       (e) Four years back         c       No       Contributions       (c) Two years back       (c) Two years back       (e) Four years back         c       Contributions       (c) Two years back       (c) Two years back       (c) Two years back       (c) Two years back         c       Contributions       (c) Two years back         c       Contributions       (c) Two years back       (c) Two years back       (c) Two years back       (c) Two years back </th <th>_</th> <th></th>	_										
1a       Beginning of year balance       Image: Contributions       Image: Contributions         b       Contributions       Image: Contributions       Image: Contributions         c       Net investment earnings, gains, and losses       Image: Contributions       Image: Contributions         c       Net investment earnings, gains, and losses       Image: Contributions       Image: Contributions         e       Other expenditures for facilities       Image: Contributions       Image: Contributions         c       Net investment earnings, gains, and losses       Image: Contributions       Image: Contributions         g       End of year balance       Image: Contributions       Image: Contributions       Image: Contributions         g       End of year balance       Image: Contributions       Image: Contributions       Image: Contributions       Image: Contributions         g       End of year balance       Image: Contributions       Image: Contributions       Image: Contributions       Image: Contributions         g       End of year balance       Image: Contributions       Image: Contribut						-		vears back	(e) Fou	r vears	back
b       Contributions	1a	Beginning of year balance	(	(-,	(1) 11		(,		(-)	<i></i>	
c       Net investment earnings, gains, and losses       Image: Constraint of the expenditures for facilities and programs         d       Grants or scholarships       Image: Constraint of the expenditures for facilities and programs         f       Administrative expenses       Image: Constraint of the expenses         g       End of year balance       Image: Constraint of the expenses         g       End of year balance       Image: Constraint of the expenses         g       End of year balance       Image: Constraint of the expenses         g       End of year balance       Image: Constraint of the expenses         g       End of year balance       Image: Constraint of the expenses         g       End of year balance       Image: Constraint of the expenses         g       End of year balance       Image: Constraint of the expenses         g       End of year balance       Image: Constraint of the expenses         g       End of year balance       Image: Constraint of the expenses         g       End of year balance       Image: Constraint of the expenses         g       End of year balance       Image: Constraint of the expension of the organizations         g       Image: Constraint on the possession of the organization's endowment funds.       Image: Constraint on the possession of the organization's endowment funds.         f </th <th>b</th> <th></th>	b										
d Grants or scholarships	c										
e Other expenditures for facilities and programs	d										
and programs	e										
f       Administrative expenses	Ū										
g End of year balance	f										
2       Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:         a       Board designated or quasi-endowment%         b       Permanent endowment%         c       Term endowment%         d       The percentages on lines 2a, 2b, and 2c should equal 100%.         3a       Are there endowment funds not in the possession of the organization that are held and administered for the organization by: <ul> <li>(i) Unrelated organizations</li></ul>											
a Board designated or quasi-endowment%         b Permanent endowment%         c Term endowment%         The percentages on lines 2a, 2b, and 2c should equal 100%.         3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: <ul> <li>(i) Unrelated organizations</li></ul>		,		e (line 1g, colu	mn (a)) held as:		1				
b       Permanent endowment%         c       Term endowment%         The percentages on lines 2a, 2b, and 2c should equal 100%.         3a       Are there endowment funds not in the possession of the organization that are held and administered for the organization by: <ul> <li>(i) Unrelated organizations</li> <li>(ii) Related organizations</li> <li>(ii) Related organizations</li> <li>b</li> <li>f"Yes" on line 3a(ii), are the related organization's endowment funds.</li> </ul> Patr VI         Land, Buildings, and Equipment.           Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.           Description of property         (a) Cost or other basis (other)         (c) Accumulated depreciation           1a         Land	а		•		( )/						
The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) Unrelated organizations (ii) Related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (other) (b) Cost or other) (c) Accumulated depreciation (d) Book value basis (investment) basis (other) (c) Accumulated depreciation (d) Book value basis (investment) basis (other) (f) Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)  14 Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)	b										
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: <ul> <li>(i) Unrelated organizations</li> <li>(ii) Related organizations</li> <li>(iii) Related organizations</li> <li>(ii) Related organizations</li> <li>(iii) Related organizations</li> <li>(iiii) Related organizations</li> <li>(iii) Related organizations</li> <li>(iii) Related organizations</li> <li>(iii) Related organizations</li> <li>(iii) Related organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.</li> </ul> <ul> <li>(a) Cost or other basis (investment)</li> <li>(b) Cost or other basis (other)</li> <li>(c) Accumulated depreciation</li> <li>(d) Book value</li> <li>(d) Book value</li> <li>(e) Other</li> <li>(f) Equipment</li> <li>(f) Sp , 555 · 45 , 765 · 13 , 790 ·</li> <li>(f) must equal Form 990, Part X, column (B). line 10c.)</li> <li>(f) must equal Form 990, Part X, column (B). line 10c.)</li> </ul>	с	Term endowment	%								
organization by:       Yes       No         (i) Unrelated organizations       3a(i)		The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.								
(i)       Unrelated organizations       3a(i)       3a(i	3a	Are there endowment funds not in the posse	ession of the organiza	ation that are h	eld and adminis	stered for t	he				
(ii) Related organizations       3a(ii)         b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3b         4 Describe in Part XIII the intended uses of the organization's endowment funds.       3b         Part VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (investment)         b Buildings       (d) Book value         c Leasehold improvements       59,555.         d Equipment       59,555.         e Other       13,790.		organization by:								Yes	No
b       If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3b         4       Describe in Part XIII the intended uses of the organization's endowment funds.         Part VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (investment)       (b) Cost or other basis (other)       (c) Accumulated depreciation         1a       Land		(i) Unrelated organizations							3a(i)		
4       Describe in Part XIII the intended uses of the organization's endowment funds.         Part VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (investment)         b Buildings       (d) Book value         c Leasehold improvements       59,555.         d Equipment       59,555.         e Other       13,790.									3a(ii)		
Part VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (investment)       (b) Cost or other basis (other)       (c) Accumulated depreciation         1a       Land	b	If "Yes" on line 3a(ii), are the related organization	ations listed as requir	red on Schedu	le R?				3b		
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (investment)       (b) Cost or other basis (other)       (c) Accumulated depreciation         1a Land	4			wment funds.							
Description of property       (a) Cost or other basis (investment)       (b) Cost or other basis (other)       (c) Accumulated depreciation         1a Land	Par										
basis (investment)     basis (other)     depreciation       1a Land						,					
b Buildings		Description of property		•		1			( <b>d)</b> Boo	k valu	e
b Buildings	1a	Land									
c         Leasehold improvements	-										
d Equipment         59,555.         45,765.         13,790.           e Other	с										
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X. column (B), line 10c.)	d	Equipment			59,555	•	45,7	65.	1	3,7	90.
	<u>Tota</u>	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	<u>X. column (B).</u>	<i>line 10c.)</i>						

Schedule D (Form 990) 2022

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Schedule D	(Form 990) 2022	HISPANIC FA	MILY	FOUNDATI	ON, II	VC.	46-4181468	Page 3
Part VII	Investments -	Other Securities.						
	Complete if the org	ganization answered "Yes"	on Form §	990, Part IV, line	11b. See F	orm 990, Part X, line 12.		
(a) Descrip	tion of security or cate	GOTY (including name of security)	(b)	Book value	(c) M	ethod of valuation: Cost	or end-of-year market v	alue
(1) Financia	al derivatives							
(2) Closely		\$						
(3) Other								
(A)								
(B)								
(C)								
(D)								
(E)								
(F)								
(G)								
(H)								
	h) must equal Form 99	0, Part X, col. (B) line 12.)						
		Program Related.						
		ganization answered "Yes"	on Form 9	990, Part IV, line	11c. See F	orm 990, Part X, line 13.		
	(a) Description of			Book value		ethod of valuation: Cost	or end-of-year market v	alue
(1)							<b>, ,</b>	
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
	h) must squal Form 00	0 Dort V and (D) line 10)						
Part IX	Other Assets.	0, Part X, col. (B) line 13.)						
		ganization answered "Yes"	on Form (	00 Part IV line	11d Soo F	form 990 Part X line 15		
			Descriptio		110. 0001		(b) Book va	مارام
(1)		(a)	Description					liue
<u>(1)</u>								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
		orm 990, Part X, col. (B) line	e 15.)					
Part X	Other Liabilitie		- /				05	
		ganization answered "Yes"	on Form s	990, Part IV, line	11e or 11f	See Form 990, Part X, III		
1.	( )	escription of liability					(b) Book va	lue
	leral income taxes							
	E TO PM RE							,000.
	E TO FUZEN							,765.
	E TO Z-BAR							,500.
(5) PA	YROLL LIAB	ILITES					73,	,387.
(6)								
(7)								
(8)								
(9)								
Total. <u>(Colu</u>	mn (b) must equal F	orm 990, Part X, col. (B) line	e 25.)				260	,652.
		sitions. In Part XIII, provide					ents 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

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	dule D (Form 990) 2022 HISPANIC FAMILY FOUNDATION		46-4181468 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Stateme	•	Return.
	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	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1	
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	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		. 3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 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>		. <b>4c</b>
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	· · · · · · · · · · · · · · · · · · ·	5
Pa	t XII Reconciliation of Expenses per Audited Financial Stateme	• •	er Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a		
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1	
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
с	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		. 3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)	4b	
С	Add lines <b>4a</b> and <b>4b</b>		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5
Pai	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.

SCHEDULE I (Form 990)			arants and Oth vernments, an					ŀ	OMB No.			
	Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.											
Department of the Treasury												
Internal Revenue Service			Go to www.irs	.gov/Form990 for	the latest inform	ation.			Inspe	ection		
Name of the organizati								Employer i				
			UNDATION, II	NC.					46-41	81468		
	formation on Grants a											
-	ation maintain records t		-			-		1				
	ward the grants or assis								X Yes	No No		
	IV the organization's pro											
	d Other Assistance to I nat received more than \$					anization answered "Y	es" on Form 990, Parl	t IV, line 21,	or any			
						(f) Method of		(1.) [				
	ldress of organization vernment	<b>(b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance		Purpose of or assistance			
		•	•	•	•	•	•	•				

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

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Schedule I (Form 990) 2022

### Schedule I (Form 990) 2022

46-4181468

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
GRANTS TO FAMILIES THAT WERE AFFECTED BY A NATURAL					PAYMENTS FOR HOUSING AND GOODS
DISASTER OR A FIRE, WHERE THEY NEED HOUSING					TO THOSE IMPACTED BY FIRE IN
ASSISTANCE. THE FUNDS HELP RELOCATE FAMILIES.	230	0.	35,772.	PURCHASE PRICE	THE COMMUNITY
DIAPERS / LITTLE SPROUTS PROGRAM FOR SINGLE					
MOTHERS	65000	0.	18,850.	PURCHASE PRICE	DIAPERS/STROLLERS
SCHOOL SUPPLIES	960	0.	6,216.	PURCHASE PRICE	SCHOOL SUPPLIES

**Part IV Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

### VERIFICATION OF THOSE NEEDING REHOUSING ASSISTANCE INCLUDES VERBAL OR

WRITTEN DOCUMENTATION PROVIDED BY THE NEW LANDLORD.

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.

INC.



Employer identification number 46 - 4181468

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

THE EXECUTIVE DIRECTOR PROVIDES THE BOARD WITH A COPY OF THE RETURN FOR

HISPANIC FAMILY FOUNDATION,

THEIR REVIEW FOR COMMENTS PRIOR TO FILING.

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

BOARD MEMBERS WERE REQUIRED TO COMPLETE CONFLICT OF INTEREST STATEMENTS AT

LEAST ANNUALLY, AND SUBMIT TO THE BOARD.

FORM 990, PART VI, SECTION C, LINE 19:

ORGANIZATIONAL DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

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Schedule O (Form 990) 2022