SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization Employer identification number MORNING STAR FOUNDATION 27-0413006 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's 4 name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college 9 or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 10 X June 30, 1975. See **section 509(a)(2).** (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 12 Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.** Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations..... g Provide the following information about the supported organization(s). (iii) Type of organization (described on lines 1-10 above (see instructions)) (i) Name of supported organization (ii) EIN (iv) Is the organization listed (v) Amount of monetary (vi) Amount of other support (see instructions) support (see instructions) your governing document? Yes No (A) (B) (C) (D) **(E)** Total

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

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

| Sec | tion A. Public Support | | | | | | | |
|--|--|-----------------------|---------------------|-------------------|---------------------|---------------------|-------------|--|
| Calendar year (or fiscal year beginning in) ► | | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total | |
| 1 | Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.') | | | | | | | |
| 2 | Tax revenues levied for the organization'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 | _ | | | | | | |
| 5 | The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | | |
| 6 | Public support. Subtract line 5 from line 4 | | | | | | | |
| Sec | tion B. Total Support | | | | | | | |
| Cale begi | ndar year (or fiscal year nning in) ► | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total | |
| 7 | Amounts from line 4 | | | | | | | |
| 8 | Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | | | | | | | |
| 9 | Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | | |
| 10 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). | | | | | | | |
| 11 | Total support. Add lines 7 through 10 | | | | | | | |
| 12 | Gross receipts from related activ | vities, etc. (see ins | structions) | | | 12 | | |
| 13 | First 5 years. If the Form 990 is organization, check this box and | for the organization | on's first, second, | third, fourth, or | fifth tax year as a | section 501(c)(3) | | |
| | tion C. Computation of Pu | | | | | | | |
| 14 | Public support percentage for 20 | (12) | | | 93 | | % | |
| . 15 | Public support percentage from | 2019 Schedule A, | Part II, line 14 | ****** | | | % | |
| 16a | 16a 33-1/3% support test—2020. If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization | | | | | | | |
| ' b | b 33-1/3% support test—2019. 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. | | | | | | | |
| 1 7 a | 7a 10%-facts-and-circumstances test—2020. 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 facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization | | | | | | | |
| | b 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization | | | | | | | |
| 18 | Private foundation. If the organ | ization did not che | eck a box on line | 13, 16a, 16b, 17a | a, or 17b, check th | nis box and see ins | tructions ► | |

Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

| Sec | tion A. Public Support | | | | | | | | |
|------------|--|--|---------------------|---------------------|---------------------|--|------------|--|--|
| Calend | ar year (or fiscal year beginning in) ► | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total | | |
| 1 | Gifts, grants, contributions, and membership fees received. (Do not include | | | | | | | | |
| | received. (Do not include | 200 571 | F0F 000 | F00 700 | 214 242 | 1.60 010 | 1 000 011 | | |
| 2 | any 'unusùal grants.') | 390,571. | 505,382. | 509,792. | 314,248. | 160,818. | 1,880,811. | | |
| 2 | merchandise sold or services | | | | | | | | |
| | performed, or facilities | | | | | | | | |
| | furnished in any activity that is related to the organization's | | | | | | | | |
| | tax-exempt purpose | | | | | | 0. | | |
| 3 | Gross receipts from activities | | | | | | | | |
| | that are not an unrelated trade or business under section 513. | | | | | | 0. | | |
| . 4 | Tax revenues levied for the | | | | | | <u> </u> | | |
| | organization's benefit and either paid to or expended on | | | | | | | | |
| | its behalf | | | | | | 0. | | |
| 5 | The value of services or | | | | | | | | |
| | facilities furnished by a governmental unit to the | | | | | | | | |
| | organization without charge | | | | | | 0. | | |
| | Total. Add lines 1 through 5 | 390,571. | 505,382. | 509,792. | 314,248. | 160,818. | 1,880,811. | | |
| 7 a | Amounts included on lines 1, 2, and 3 received from | | | | | | | | |
| | disqualified persons | 0. | 0. | 0. | 0. | 0. | 0. | | |
| b | Amounts included on lines 2 | | | • | | | | | |
| | and 3 received from other than disqualified persons that | | | | | | | | |
| | exceed the greater of \$5,000 or | | | | | | | | |
| | 1% of the amount on line 13 for the year | | | | _ | | 0 | | |
| _ | Add lines 7a and 7b | 0. | 0. | 0. | 0. | 0. | 0. | | |
| | Public support. (Subtract line | 0. | 0. | 0. | 0. | 0. | <u> </u> | | |
| 0 | 7c from line 6.) | | | | | | 1,880,811. | | |
| Sec | tion B. Total Support | | | | | | | | |
| Calen | dar year (or fiscal year beginning in) 🕨 | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total | | |
| 9 | Amounts from line 6 | 390,571. | 505,382. | 509,792. | 314,248. | 160,818. | 1,880,811. | | |
| 10a | Gross income from interest, dividends, | | | | | | | | |
| | payments received on securities loans, rents, royalties, and income from | | | | | | | | |
| _ | similar sources | 46. | 114. | 125. | 142. | 75. | 502. | | |
| b | Unrelated business taxable income (less section 511 | | | | | | | | |
| | taxes) from businesses | | | | | | | | |
| | acquired after June 30, 1975 | 16 | | 105 | 1.40 | | 0. | | |
| 11 | Add lines 10a and 10b Net income from unrelated business | 46. | 114. | 125. | 142. | 75. | 502. | | |
| | activities not included in line 10b, | | | | | | | | |
| | whether or not the business is | | | | | | 0 | | |
| 12 | regularly carried on Other income. Do not include | | | | | | 0. | | |
| | gain or loss from the sale of | | | | | | | | |
| S | capital assets (Explain in Part VI.) | | | | | | 0. | | |
| 13 | Total support. (Add lines 9, | | | | | | | | |
| | 10c, 11, and 12.) | 390,617. | 505,496. | 509,917. | | 160,893. | 1,881,313. | | |
| 14 | First 5 years. If the Form 990 is organization, check this box and | for the organizatio stop here | n's first, second, | third, fourth, or f | ifth tax year as a | section 501(c)(3) | ▶ | | |
| Sec | tion C. Computation of Pu | | | | | | | | |
| 15 | Public support percentage for 20 | 20 (line 8, column | (f), divided by lin | ne 13, column (f) |) | 15 | 99.97 % | | |
| 16 | Public support percentage from | 2019 Schedule A, | Part III, line 15 | | | 16 | 99.98 % | | |
| Sec | tion D. Computation of Inv | estment Incon | ne Percentage | | | | | | |
| 17 | Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f)) | | | | | | | | |
| 18 | | | | | | | | | |
| 19a | 33-1/3% support tests-2020. If | | | | | | id line 17 | | |
| | is not more than 33-1/3%, check | • | - | 1051 | | | | | |
| D | 33-1/3% support tests—2019. If the line 18 is not more than 33-1/3% | ine organization di L, check this box a | ind stop here. The | e organization qu | alifies as a public | o is more than 33 ly supported orga | nization | | |
| 20 | Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ | | | | | | | | |

| га | Supporting Organizations (continued) | - | | |
|----|---|------------|--------|-----|
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | | Yes | No |
| | A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization? | 11a | | |
| | b A family member of a person described in line 11a above? | 11b | | |
| | C A 35% controlled entity of a person described in line 11a or 11b above? If 'Yes' to line 11a, 11b, or 11c, provide detail in Part VI. | 11c | | |
| | ction 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 Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. | 1 | | |
| 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 | | |
| Se | ction C. Type II Supporting Organizations | | | |
| | | | Yes | No |
| 1 | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). | 1 | | |
| Se | ction D. All Type III Supporting Organizations | | | |
| 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 | Yes | No |
| 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 | 04. | |
| 3 | By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard. | 3 | | |
| Se | ction E. Type III Functionally Integrated Supporting Organizations | | | |
| 1 | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). | | | |
| | a The organization satisfied the Activities Test. Complete line 2 below. | | | |
| | b The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i> | | | |
| | The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see | e instri | uction | s). |
| 2 | Activities Test. Answer lines 2a and 2b below. | | Yes | No |
| | 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. | 2 a | 163 | |
| | b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. | 2b | | |
| 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? <i>If 'Yes' or 'No,' provide details in Part VI.</i> | 3 a | | |
| | b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If 'Yes,' describe in Part VI the role played by the organization in this regard.</i> | 3b | | |

| Pa | rt iv Supporting Organizations (continued) | | | |
|----------|---|-------------|---------|-----|
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | E SERVE AND | Yes | No |
| | A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization? | 11- | | |
| | b A family member of a person described in line 11a above? | 11a | | |
| | • A 35% controlled entity of a person described in line 11a or 11b above? If 'Yes' to line 11a, 11b, or 11c, provide detail in Part VI . | 11b | | |
| | ction B. Type I Supporting Organizations | 110 | | |
| <u> </u> | ction 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 Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. | 1 | | |
| 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 | | |
| Se | ction C. Type II Supporting Organizations | | | |
| | | | Yes | No |
| 1 | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). | 1 | | |
| Se | ction D. All Type III Supporting Organizations | | | |
| 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 | Yes | No |
| 2 | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). | 2 | | |
| 3 | By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard. | 3 | | |
| Se | ction E. Type III Functionally Integrated Supporting Organizations | | | |
| 1 | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). | | | |
| • | a The organization satisfied the Activities Test. Complete line 2 below. | | | |
| | b The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i> | | | |
| | | - !a | 4 ! | -1 |
| | c The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see | e mstr | ictions | 5). |
| 2 | Activities Test. Answer lines 2a and 2b below. | | Yes | No |
| | 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. | 2a | | |
| | b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. | 2b | | |
| 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. | 3a | | |
| | b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If 'Yes,' describe in Part VI the role played by the organization in this regard.</i> | 3b | | |

| | Check here if the organization satisfied the Integral Part Test as a qualifying trust instructions. All other Type III non-functionally integrated supporting organization | ns must | complete Sections A | Part VI). See through E. | |
|-----|--|----------------|-----------------------------------|------------------------------------|--|
| Sec | tion A — Adjusted Net Income | (A) Prior Year | ear (B) Current Yea (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 | | | |
| Sec | tion B — Minimum Asset Amount | | (A) Prior Year | (B) Current Yea (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): | | | | |
| ē | Average monthly value of securities | 1a | | | |
| ŀ | Average monthly cash balances | 1b | | | |
| (| Fair market value of other non-exempt-use assets | 1c | | | |
| (| d Total (add lines 1a, 1b, and 1c) | 1d | | | |
| • | e Discount claimed for blockage or other factors (explain in detail in 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 | | | |
| Sec | ction 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 | | 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 inte (see instructions). | egrated | Type III supporting or | ganization | |

| | dule A (Form 990 or 990-EZ) 2020 MORNING STAR FOUNDAT | | | -041 | 3006 | Page 7 |
|-----|---|--------------------------------|---------------------------------------|------|---------------------------------|--------|
| Par | t V Type III Non-Functionally Integrated 509(a)(3) Su | pporting Organiza | tions (continue | d) | | |
| Sec | tion D — Distributions | | | | Current ' | Year |
| 1 | Amounts paid to supported organizations to accomplish exempt pur | poses | | 1 | | |
| 2 | Amounts paid to perform activity that directly furthers exempt purposes of | of supported organization | s, | | | |
| | in excess of income from activity | | | 2 | | |
| 3 | Administrative expenses paid to accomplish exempt purposes of su | | 3 | | | |
| 4 | Amounts paid to acquire exempt-use assets | | | 4 | | |
| _ 5 | Qualified set-aside amounts (prior IRS approval required - provide | details in Part VI) | | 5 | | |
| 6 | Other distributions (describe in Part VI). See instructions. | | | 6 | | |
| 7 | Total annual distributions. Add lines 1 through 6. | | | 7 | | |
| ੍ 8 | Distributions to attentive supported organizations to which the organization | on is responsive (provide | details | | | |
| 9 | in Part VI). See instructions. | | | 8 | | |
| | Distributable amount for 2020 from Section C, line 6 | | | 10 | | |
| 10 | Line 8 amount divided by line 9 amount | | | 110 | | |
| Sec | tion E — Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistribution Pre-2020 | ons | (iii) Distribut Amount fo | table |
| 1 | Distributable amount for 2020 from Section C, line 6 | | | | | |
| 2 | Underdistributions, if any, for years prior to 2020 (reasonable cause required — explain in Part VI). See instructions. | | | | | |
| 3 | Excess distributions carryover, if any, to 2020 | | | | | |
| 2 | From 2015 | | | | | |
| ŀ | From 2016 | | | | | |
| | From 2017 | Company of the second | | | | |
| • | From 2018 | | | | | |
| • | From 2019 | | | | | |
| | f Total of lines 3a through 3e | | | | | |
| | Applied to underdistributions of prior years | | A11 | | | |
| H | Applied to 2020 distributable amount | | | | | |
| | i Carryover from 2015 not applied (see instructions) | | | | | |
| | Remainder. Subtract lines 3g, 3h, and 3i from line 3f. | | 对外的 ,所以在 | | | |
| 4 | Distributions for 2020 from Section D, line 7: | | | | | |
| | Applied to underdistributions of prior years | | | | | |
| ŀ | Applied to 2020 distributable amount | | | | | |
| | Remainder. Subtract lines 4a and 4b from line 4. | | | | | |
| 5 | Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions. | | | | | |
| 6 | Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions. | | | | | |
| _ 7 | Excess distributions carryover to 2021. Add lines 3j and 4c. | | | | | |
| 8 | Breakdown of line 7: | | | | | |

e Excess from 2020..... BAA

a Excess from 2016..... **b** Excess from 2017..... c Excess from 2018..... d Excess from 2019.....

Schedule A (Form 990 or 990-EZ) 2020