Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

AF	or tne	2022 calendar year, or tax year beginning and	enaing						
B C	heck if opticable:	C Name of organization		D Employer identific	ation number				
	Address change	SECOND AMENDMENT FOUNDATION							
	Name change	Doing business as		91-618416					
F]Initial _return Final	Number and street (or P.O. box if mail is not delivered to street address) 12500 N.E. 10TH PLACE	Room/suite	E Telephone number (425)454-7012					
	_return/ termin-		L	G Gross receipts \$	6,805,736.				
_	ated ∏Amend∈	City or town, state or province, country, and ZIP or foreign postal code							
<u></u>	_ireturn ∏Applica	BEHLEVOE, WA 30003		H(a) Is this a group re					
L	_tion _pending	P Name and address of principal officer. ALLALY IT COTTLIED			?Yes X No				
		12500 N.E. 10TH PLACE, BELLEVOE, WA 90	3005	7	cluded? Yes No				
<u> </u>	ax exe	mpt status: X 501(c)(3) 501(c)() (insert no.) 4947(a)(1)	or 527	If "No," attach a	list. See instructions				
JV	Vebsit	www.saf.org		H(c) Group exemption	number				
ΚF	orm of	organization; X Corporation Trust Association Other	L Year	of formation: 1974 N	State of legal domicile: WA				
		Summary							
	1 1	Briefly describe the organization's mission or most significant activities: EDUC	ATION	IN SUPPORT C	F GUN				
ce		RIGHTS							
Governance	-	Check this box if the organization discontinued its operations or dispos	sed of more	than 25% of its net ass	ets.				
ern				1 1	9				
õ	1				8				
ص م		Number of independent voting members of the governing body (Part VI, line 1b)			13				
8	1	fotal number of individuals employed in calendar year 2022 (Part V, line 2a)		1 I					
ij	6	Total number of volunteers (estimate if necessary)			0				
Activities &	7 a -	Fotal unrelated business revenue from Part VIII, column (C), line 12		7a	0.				
⋖	b	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.				
				Prior Year	Current Year				
Revenue	8 (Contributions and grants (Part VIII, line 1h)		7,347,473.	6,789,698.				
	1	Program service revenue (Part VIII, line 2g)		0.	0.				
	i .	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		20,857.	14,988.				
E G		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	- 1	1,370.	1,050.				
			1	7,369,700.	6,805,736.				
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		0.	0.				
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.				
		Benefits paid to or for members (Part IX, column (A), line 4)							
Ø	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		315,039.	375,854.				
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.				
g.	b ·	Total fundraising expenses (Part IX, column (D), line 25) 925,1	96.						
ய	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		6,459,502.	6,638,819.				
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	L	6,774,541.	7,014,673.				
		Revenue less expenses, Subtract line 18 from line 12	1	595,159.	-208,937.				
<u>~</u> %				eginning of Current Year	End of Year				
ets or	20	Total assets (Part X, line 16)		8,657,410.	8,653,142.				
Net Asset	21	Total liabilities (Part X, line 26)		472,445.	845,492.				
et/	6	Net assets or fund balances. Subtract line 21 from line 20		8,184,965.	7,807,650.				
	22 art II	Signature Block		0/202/2001					
		Ities of perjury, I declare that I have examined this return, including accompanying schedule	oo and statem	ante and to the heet of my	r knowledge and helief it is				
					Allowiedge and beller, it is				
true	, correc	t, and complete. Declaration of preparer (other than officer) if based on all information of w	vilicii preparei	lias asiy kilowiedye,	12.5				
		Hay W Houlet		Date	10001				
Sig		Signature of officer	_	Date					
Her	re	ALAN M GOTTLIEB, EXECUTIVE VICE PRESIDEN	<u>l'</u>						
		Type or print name and title		D-1-	TATIAL				
		Print/Type preparer's name Preparer's signature		Date Check If	PTIN				
Paid	d	DONALD W. GRACIA DONALD W. GRACI	Α	07/24/23 self-employ	_{red} P00031582				
Preparer Firm's name COX & GRACIA, P.S. Firm's EIN 91-1									
Use Only Firm's address 10655 NE 4TH STREET, SUITE 611									
	•	BELLEVUE, WA 98004		Phone no. (4	25) 454-1354				
Ma	v the II	RS discuss this return with the preparer shown above? See instructions			X Yes No				
·vict	, 415 ()	TO STORAGE THE TO STORAGE STORE STOR			Form 990 (2022)				

orm	990 (2022) SECOND AMENDMENT FOUNDATION	91-618416/ Page 2
Par	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:	
	EDUCATION IN SUPPORT OF GUN RIGHTS	
2	Did the organization undertake any significant program services during the year which were not listed on the	
_	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
_	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
3		
_	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as n	nessured by expenses
4	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others	the total expenses and
		s, the total expenses, and
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 2,812,476. including grants of \$) (Revenue) (Revenue	
	PUBLIC EDUCATION IN SUPPORT OF GUN RIGHTS, INCLUDING THE	ITUTION AND THE
		LTUTION AND THE
	INVOLVEMENT OF FIRE ARMS IN CRIME PREVENTION.	
4b	(Code:) (Expenses \$ 3,056,171. including grants of \$) (Revent	
	LEGAL ACTION IN DEFENSE OF GUN OWNERS, INCLUDING CONSTITU	UTIONAL
	CHALLENGE OF LAWS IN THE COURTS. (EXCLUDING LEGAL SERVICE	CE PERFORMED
	PRO BONO).	
	\(\(\)	ute \$
4c	Code:) (Expenses \$) (Reven	Ne\$)
4d	d Other program services (Describe on Schedule O.)	
-ru	(Expenses \$ including grants of \$) (Revenue \$)
4e	5 868 647	
		000

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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)? X If "Yes," complete Schedule A X 2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for X public office? /f "Yes." complete Schedule C. Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect Х 4 during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or X 5 similar amounts as defined in Rev. Proc. 98-197 If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to X 6 provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete X 8 Schedule D, Part III 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? X 9 If "Yes." complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in donor-restricted endowments X 10 or in quasi endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X, 11 a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, X 11a Part VI b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total X 11b assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total Х 11c assets reported in Part X, line 16? If "Yes." complete Schedule D, Part VIII d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Х 11d Part X, line 16? If "Yes," complete Schedule D, Part IX X e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 111 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Х 12a Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year? 12b If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a 14a Did the organization maintain an office, employees, or agents outside of the United States? 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 X 14b or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any 15 X 15 foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to 16 X 16 or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, Х column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines Х 18 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? // "Yes." 19 X 19 complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H **b** If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or X domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Form 990 (2022)

Form **990** (2022)

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Par	t IV Checklist of Required Schedules (continued)			Г.,_
	Division of the state of the st		Yes	No
	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	22		x
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current	2-6-		
23	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	·	23		х
24.0	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
24 a	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	ļ		
	Schedule K. If "No," go to line 25a	24a		Х
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
н	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		Ī	
250	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
h	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		1	
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
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
2.1	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,	400		
20	instructions for applicable filing thresholds, conditions, and exceptions):			
_	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? #			
a	"Yes," complete Schedule L, Part IV	28a	X	
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	Х	
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? //			Г
·	"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			
30	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			
QZ.	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
33	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			
34	Part V, line 1	34	x	
35.5	Did the organization have a controlled entity within the meaning of section 512(b)(13)?			X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			\Box
v	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?			T
00	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			
O,	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?			
30	Note: All Form 990 filers are required to complete Schedule O	. 38	X	1
Pa	art V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
19	a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	2		
	Enter the number of Forms W-2G included on line 1a, Enter -0- if not applicable 1b	0		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
Ī	(gambling) winnings to prize winners?	<u>1c</u>	X	

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Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)							
			Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,							
	filed for the calendar year ending with or within the year covered by this return 2a 13		1000					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X					
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X					
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	_X					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			37				
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		<u> X</u>				
b	If "Yes," enter the name of the foreign country							
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		44444	v				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X				
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c						
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	_		х				
	any contributions that were not tax deductible as charitable contributions?	6a		Δ.				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	C.L.						
	were not tax deductible?	6b	353.53	9,7450				
7	Organizations that may receive deductible contributions under section 170(c).		.,	Х				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		25				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b						
¢	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7c		Х				
	to file Form 8282? If "Yes " indicate the number of Forms 8282 filed during the year 7d	7,5	11000	111				
ď	1 100) 1101000 11011000 11011000 11011000 110110	7e	1 2 1 1					
6	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f						
t ~	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g						
g	to the state of th							
h 8								
0	sponsoring organization have excess business holdings at any time during the year?							
9								
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a						
b	The state of the s	9b						
10	Section 501(c)(7) 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 10b	1						
11	Section 501(c)(12) organizations. Enter:							
а	Gross income from members or shareholders							
	Gross income from other sources. (Do not net amounts due or paid to other sources against							
	amounts due or received from them.)							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	314133		8,83				
а	Is the organization licensed to issue qualified health plans in more than one state?	13a						
	Note: See the instructions for additional information the organization must report on Schedule O.							
b	Enter the amount of reserves the organization is required to maintain by the states in which the							
	organization is licensed to issue qualified health plans							
c	Enter the amount of reserves on hand	(8,113)	(3.2.3.)	CASE:				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<u> </u>	X				
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	<u> </u>	<u> </u>				
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or							
	excess parachute payment(s) during the year?	15		X				
	If "Yes," see the instructions and file Form 4720, Schedule N.							
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X				
	If "Yes," complete Form 4720, Schedule O.	1 486		15/35/				
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	1 10 50 50	1 25454				
	If "Yes," complete Form 6069.	4553.5	10000	1 1000				

Form 990 (2022) SECOND AMENDMENT FOUNDATION 91-6184167 Page
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.

	Check if Schedule O contains a response or note to any line in this Part VI			<u></u>		X				
Sec	tion A. Governing Body and Management									
		ı.			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	9							
	If there are material differences in voting rights among members of the governing body, or if the governing									
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.									
b	Enter the number of voting members included on line 1a, above, who are independent	1b	8							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with any other		William.						
	officer, director, trustee, or key employee?			2		X				
3	Did the organization delegate control over management duties customarily performed by or under the	direct supervision								
	of officers, directors, trustees, or key employees to a management company or other person?			3		X				
4	Did the organization make any significant changes to its governing documents since the prior Form 99	00 was filed?		4		X				
5	Did the organization become aware during the year of a significant diversion of the organization's asset	ets?		5		X				
6										
7a	Did the organization have members, stockholders, or other persons who had the power to elect or app									
	more members of the governing body?			7a		X				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, sto	ockholders, or								
	persons other than the governing body?			7b		X				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			200		Valed				
а	The governing body?			8a	X					
b	Each committee with authority to act on behalf of the governing body?			8b	X					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read									
•	organization's mailing address? If "Yes." provide the names and addresses on Schedule O			9		X				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev									
	This Section of Toyacsis information about political less required by the information about	0,700			Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?			10a		Х				
	If "Yes," did the organization have written policies and procedures governing the activities of such characteristics.									
.,				10b						
11a	The second section is a second section of the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a section in the second section in the section is a section in the section in the section in the section is a section in the section in the section in the section is a section in the section in the section in the section is a section in the s		rm?	11a		Х				
	The state of the s	201212 1				W.				
	makes a second of the second o									
12a	the control of the co	_		12a 12b	X					
b	The state of the s		********	1						
c	on Schedule O how this was done			12c	X					
40				13	X					
13	Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?			14	X					
14	Did the process for determining compensation of the following persons include a review and approva					1112				
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	by maopondom								
	The state of the s			15a		х				
a L	The organization's CEO, Executive Director, or top management οπισιαι Other officers or key employees of the organization			15b		X				
D	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			100						
40	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	nent with a								
тьа				16a		Х				
,	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat			150						
מ	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ									
				16b	1					
50.	exempt status with respect to such arrangements?			1 100	<u> </u>					
	List the states with which a copy of this Form 990 is required to be filed WA, OR, PA, MN, O	H.WV.TT.T	L FI	, WT	, MD	ME				
17	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar									
18	for public inspection. Indicate how you made these available. Check all that apply.	ia ooo i jacciioli o	~ 1 (U)(U)	o o ny)	~ 4 14116					
		an Cobodida Ci								
		n on Schedule O) Inflict of interest po	liov on	d finan	cial					
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	minut of interest po	noy, an	и шкаП	oidi					
_	statements available to the public during the tax year.	ake and recent								
20	State the name, address, and telephone number of the person who possesses the organization's box	oks and records								
	MR. ALAN GOTTLIEB - 425-454-7012									
	12500 N.E. 10 PLACE, BELLEVUE, WA 98005 SEE SCHEDULE O FOR FULL LIST OF STATES			Eare	, 990	(2022				
0000	******** *** ***** *******************				,,	- 124//				

Page 7

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

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

Check this box if neither the organization ne	or any related o	orga	niza	tion	con	pen	sate	ed any current officer, di	rector, or trustee.	
(A)	(B)		(C) Position					(D)	(E)	(F) Estimated
Name and title	Average hours per	{do	not c	heck I	more	than c s both	ene	Reportable compensation	Reportable compensation	amount of
	week	offic	, unter cer an	dad	recto	r/trust	tee)	from	from related	other
	(list any	ctor						the	organizations	compensation
	hours for	ır dire				bet		organization	(W-2/1099-MISC/	from the
	related	stee c	ruste			pensa		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	la tru	Billo		ploye	t com		1099-NEC)		and related organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			Organizations
(1) ALAN GOTTLIEB	26.00		<u> </u>	0	×	± 45				
DIRECTOR/VICE PRES		Х		Х				36,000.	0.	12,666.
(2) ROBERT WIEST	1.00									
DIRECTOR/TREASURER		Х		X				0.	0.	0.
(3) SAM SLOM	1.00									_
DIRECTOR/SECRETARY		X		X	<u> </u>			0.	0.	0.
(4) TOM GRESHAM	1.00	1								
DIRECTOR		Х	<u> </u>			<u> </u>	<u> </u>	0.	0.	0.
(5) GENE HOFFMAN, JR.	1.00	l	İ							_
DIRECTOR		X	<u> </u>	_	<u> </u>	ļ	<u> </u>	0.	0.	0.
(6) MASSAD AYOOB	1.00			l						_
DIRECTOR/PRESIDENT	1	X	_	Х	<u> </u>	<u> </u>	_	0.	0.	0.
(7) JIM IRVINE	1.00	۱					İ	_		,
DIRECTOR	1 00	X	_	<u> </u>	┞	-	┡	0.	0.	0.
(8) D. ALLEN YOUNGMANG	1.00	-						0.	0.	0.
DIRECTOR	1.00	Х	┡	├	├	┝	┢	U.	0.	0.
(9) FREDY REIHL	1.00	x						0.	0.	0.
DIRECTOR		^	\vdash	├	╂	╁	\vdash	U .	V •	0.
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		1								
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	<u> </u>			<u> </u>	<u>L.</u>	1	1			

Part \	Section A. Officers, Directors, Tru	stees, Key Em	oloy	ees,	and	Hig	ghes	t Co	ompensated Employee	s (continued)			
	(A)	(B)	ĺ		((C)			(D)	(E)		(F)	
	Name and title	Average	(do	Position (do not check more than one box, unless person is both an officer and a director/trustee)				one	Reportable	Reportable	Esti	imate	d
		hours per	box				s both	าลภ	compensation	compensation		ount c	of
		week		cer an	aaa	ar ector a datee)		tee)	from	from related		ther	
		(list any hours for	recto						the	organizations	comp	ensat m the	
		related	0.0	a			ated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)		nn me nizati	
	,	organizations	ustee	trust		8	lieu Lieu		1099-NEC)	1000-NLOj	-	relate	
		below	lea t	tions	L	흏	is ag	<u>, , , , , , , , , , , , , , , , , , , </u>	(555 1125)			nizatio	
		line)	Individual trustee or director	Institutional trustee	Officer	сеу етрюуве	Highest compensated employee	Former					
													•
					<u> </u>		-						
			_	ļ						-			
			 		_	\vdash						-	
			<u> </u>	ļ		ļ	_	<u> </u>					
			<u> </u>	-	-	-							
			1										
	Subtotal								36,000.	0.	12	2,60	66.
	otal from continuation sheets to Part								0.	0.	1.		0.
	otal (add lines 1b and 1c)								36,000.	<u> </u>	<u> </u>	2,6	50.
	otal number of individuals (including but	not limited to the	ose	liste	ed al	bove	e) wr	no re	eceived more than \$100	,000 of reportable			0
c	ompensation from the organization										—т	Yes	No
	,					_						162	INO
	old the organization list any former office											14711	X
	ne 1a? If "Yes," complete Schedule J for										3	jajaja ka	Δ
	for any individual listed on line 1a, is the										CENTA	4150441	Х
	and related organizations greater than \$1										4	0.3544	_
5 D	oid any person listed on line 1a receive o	r accrue compe	nsat	ion f	rom	any	unr/	elate	ed organization or indivi	dual tor services		sth (still	Miss.

rendered to the organization? *If* "Yes." complete Schedule J for such person

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
SOUTHWEST PUBLISHING & MAILING 4000 SE ADAMS ST, TOPEKA, KS 66609	PRINTING/MAILING	532,863.
RRTV MEDIA, 3948 3RD ST. S, SUITE 18, JACKSONVILLE, FL 32250-5847	ADVERTISING	347,775.
MERRIL ASSOCIATES 12500 NE 10TH PL, BELLEVUE, WA 98005	MAIL, MARKETING/LIST RENTAL	346,445.
SERVICE BUREAU COOPERATIVE INC 12500 NE 10TH PL, BELLEVUE, WA 98005	DATA PROC/ACCTG	324,006.
BECK RIDDEN LLP, 1221 MCKINNEY STREET, SUITE 4500, HOUSTON, TX 77010	DIGITAL MEDIA STRATEGY	219,099.
2 Total number of independent contractors (including but not limited to those lister \$100,000 of compensation from the organization 5	ed above) who received more than	

91-6184167 Page 9 SECOND AMENDMENT FOUNDATION Form 990 (2022) Statement of Revenue Part VIII Check if Schedule O contains a response or note to any line in this Part VIII (B) Revenue excluded Related or exempt Unrelated Total revenue from tax under sections 512 - 514 function revenue business revenue 1 a Federated campaigns 1a 1b b Membership dues c Fundraising events _____ 1c d Related organizations 1d 1e Government grants (contributions) f All other contributions, gifts, grants, and 6,789,698. similar amounts not included above ... 11 Q Noncash contributions included in lines 1a-1f 6,789,698. h Total. Add lines 1a-1f **Business Code** Program Service f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 14,988. 14,988. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties 5 (i) Real (ii) Personal 6 a Gross rents 6a b Less; rental expenses ... 6b c Rental income or (loss) 6¢ d Net rental income or (loss) (ii) Other (i) Securities 7 a Gross amount from sales of assets other than inventory **b** Less: cost or other basis and sales expenses 7b Revenue c Gain or (loss) ______7c d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 9a b Less: direct expenses ______9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns 10a and allowances 10b b Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code** 1,050. 513120 1,050. 11 a SUBSCRIPTIONS d All other revenue 1,050. e Total. Add lines 11a-11d

6,805,736.

12 Total revenue. See instructions

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 (B) Program service expenses (**D)** Fundraising (A) Total expenses Do not include amounts reported on lines 6b, Management and general expenses expenses 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 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 Compensation of current officers, directors, 25,200. 5,400. 5,400. 36,000. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7,933. 246,598. 238,665. Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 57,261. 57,261. Other employee benefits 3,881. 35,995. 29,034. 3,080. Payroll taxes 10 Fees for services (nonemployees): a Management 2,967,157. 2,967,157. b Legal Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 410,872. 82,672. 205,721. 699,265. column (A), amount, list line 11g expenses on Sch O.) 1,051,465. 1,051,465. Advertising and promotion 12 13 Office expenses _____ Information technology 14 Royalties 15 13,054. 5,410. 101,269. 82,805. Occupancy _____ 16 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials ... 603. 192,747. 192,144. Conferences, conventions, and meetings 19 20 Interest Payments to affiliates 21 2,310. 2,310. Depreciation, depletion, and amortization 22 23 Insurance Other expenses, Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 387,881. 287,643. 675,524. POSTAGE & SHIPPING 284,152. 589,759. 305,607. b PRINTING 109,519. 109,508. 219,027. c MAILING LIST RENTAL 3,095. 7,468. 57,934. 47,371. d SUPPLIES 82,362. 20,927. 60,999. 436. e All other expenses 220,830. 925,196. 7,014,673. 5,868,647. Total functional expenses. Add lines 1 through 24e 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 X If following SOP 98-2 (ASC 958-720)

Balance Sheet Part X Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year (B) End of year 3,833,782. 3,709,576. 1 Cash - non-interest-bearing 2,606,684. 2,609,217. 2 2 Savings and temporary cash investments Pledges and grants receivable, net 3 3 4 Accounts receivable, net 4 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 5 controlled entity or family member of any of these persons Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 50,000. 50,000. 7 Notes and loans receivable, net Inventories for sale or use 8 35,544. 35,545. Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 325,707. basis, Complete Part VI of Schedule D _____ 10a 2,352. 708,707. 3,093. 322,614. b Less: accumulated depreciation 10b 540,328. 11 Investments - publicly traded securities 11 1,530,213. 1,530,213. Investments - other securities. See Part IV, line 11 12 12 13 Investments - program-related. See Part IV, line 11 13 14 14 Intangible assets 50,965. 14,333. Other assets. See Part IV, line 11 15 15 8,657,410. 8,653,142. 16 Total assets. Add lines 1 through 15 (must equal line 33) 16 808,860. 472,445. 17 17 Accounts payable and accrued expenses 18 Grants payable 18 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to any current or former officer, director, 22 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 Unsecured notes and loans payable to unrelated third parties 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 36,632. 0 of Schedule D 845,492. 472,445. 26 Total liabilities. Add lines 17 through 25 X Organizations that follow FASB ASC 958, check here Fund Balances and complete lines 27, 28, 32, and 33. 7,807,650. 8,184,965. 27 Net assets without donor restrictions Net assets with donor restrictions 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Net Assets or Capital stock or trust principal, or current funds 29 29 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 7,807,650. 8,184,965. Total net assets or fund balances 32 32 8,653,142. 8,657,410. Total liabilities and net assets/fund balances

Form 990 (2022)

Form	990 (2022) SECOND AMENDMENT FOUNDATION	<u>91-</u>	<u>-6184167</u>	Pag	_{je} 12
	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			,	<u>.</u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,80		
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,01		
3	Revenue less expenses. Subtract line 2 from line 1	3	-20		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	8,18	4,9	<u>65.</u>
5	Net unrealized gains (losses) on investments	5	-16	8,3	78.
6	Donated services and use of facilities	6			
7	Investment expenses	7	·····		
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	7,80	7,6	<u>50.</u>
Pa	rt XII Financial Statements and Reporting				,
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>			
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ю.	9(3)	WAA!	Salar
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	ə basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis		(ASA)		
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ə audit,	1		
	review, or compilation of its financial statements and selection of an independent accountant?		l _	<u></u>	X
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule (o. 🐃		10000
За	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>	X
	and the second s		3:4	1	ı

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why on Schedule O and describe any steps taken to undergo such audits

SCHEDULE A

(Form 990)

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

Open to Public Inspection

Employer identification number

Name of	me of the organization Employer identification number											
			T FOUNDATION					1-6184167				
Part I	Reason for Public C	harity Status. (/	All organizations must co	mplete th	is part.) Se	e instruction	ıs.					
The organ	ization is not a private founda	ition because it is: (F	or lines 1 through 12, ch	eck only o	ne 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	on 170(b)(1)(A)(ii). (A	ttach Schedule E (Form	990).)								
з 🔲	A hospital or a cooperative h	nospital service organ	nization described in se	ction 170(b)(1)(A)(iii)).						
4	A medical research organiza)(iii). Enter t	the hospital's name,				
	city, and state:											
5	An organization operated for	r the benefit of a coll	ege or university owned	or operate	d by a gov	ernmental u	nit describe	d in				
	section 170(b)(1)(A)(iv). (Complete Part II.)											
6	A federal, state, or local gov	*	ental unit described in s	ection 17	0(b)(1)(A)(v).						
7 X												
, [section 170(b)(1)(A)(vi). (Complete Part II.)											
8 🗌	A community trust describe		MAVvi\ (Complete Part	11)								
9 🗔	An agricultural research orga				d in coniu	nction with a	land-grant	college				
5	or university or a non-land-g											
	university:	ant conlege of agrice	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,,,							
10	An organization that normal	ly receives (1) more t	han 33 1/3% of its suppo	ort from co	ntribution.	s. membersh	nip fees, and	aross receipts from				
10	activities related to its exem											
	income and unrelated busin											
	See section 509(a)(2). (Con		jess section of real no	ili Dagirica	303 doquii	ed by the on	guinzation a	100, 00110 00, 10101				
	An organization organized a	,	why to tast for public eaf	atu Saa e	eation 50	(A)(A)						
11	An organization organized a						erns out the	nurnoses of one or				
12	more publicly supported org											
	lines 12a through 12d that of							Modit the box on				
								nivina				
a <u>∟</u>	Type I. A supporting orga											
	the supported organization			majonty o	ine direc	tors or truste	es or the su	pporting				
	organization. You must c			ttale fac			m/a\ bu bau	ina				
b	Type II. A supporting orga											
	control or management of			ıme persoi	ns that cor	itrol or mana	ige the supp	oortea				
_	organization(s). You mus	•						1 101				
c L	Type III functionally inte						illy integrate	d with,				
_	its supported organization											
d L	Type III non-functionally											
	that is not functionally int						d an attentiv	/eness				
	requirement (see instructi											
e [Check this box if the orga	ınization received a v	vritten determination fro	m the IRS	that it is a	Type I, Type	II, Type III					
	functionally integrated, or	Type III non-function	nally integrated supportin	ng organiz	ation.							
f En	ter the number of supported o	organizations										
g Pro	ovide the following information		d organization(s).									
	(i) Name of supported	(ii) ElN	(iii) Type of organization (described on lines 1-10	in your governi	inization listed ing document?	(v) Amount	•	(vi) Amount of other				
	organization		above (see instructions))	Yes	No	support (see	instructions)	support (see instructions)				
-												
		·										
				<u> </u>								
Total				100000000000000000000000000000000000000								

Schedule A (Form 990) 2022
Part II Support Sch 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						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	4619618.	4381885.	5111883.	7347473.	6789698.	28250557.
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	4619618.	4381885.	5111883.	7347473.	6789698.	28250557.
	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.						28250557.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	4619618.	4381885.	5111883.	7347473.	6789698.	28250557.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	24,650.	24,974.	20,044.	20,857.	14,988.	105,513.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on	79,337.	32,115.				111,452.
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	58,666.	48,514.	1,400.	1,370.	1,050.	111,000.
11	Total support. Add lines 7 through 10						28578522.
	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	01(c)(3)	
	organization, check this box and sto						
Se	ction C. Computation of Publ	ic Support Per	centage				
14	Public support percentage for 2022 (line 6, column (f), d	livided by line 11,	column (f))		14	98.85 %
	Public support percentage from 2021					15	98 .14 %
16a	33 1/3% support test - 2022. If the						
	stop here. The organization qualifies						
k	33 1/3% support test - 2021. If the	organization did no	ot check a box on	line 13 or 16a, and	l line 15 is 33 1/3%	or more, check the	nis box
	and stop here. The organization qua						
178	a 10% -facts-and-circumstances tes						
	and if the organization meets the fact						
	meets the facts-and-circumstances to						
ŀ	o 10% -facts-and-circumstances tes						
	more, and if the organization meets t						
	organization meets the facts-and-circ						
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17	b, check this box a		
						Cahadula /	\ (Earm 990\ 2022

Schedule A (Form 990) 2022 SECOND AMENDMENT FOUNDATION Part III | Support Schedule for Organizations Described in Section 509(a)(2)

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

Sec	tion A. Public Support				1		
Cale	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						,
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that					,	
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources						
Ŀ	Unrelated business taxable income					ļ	
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
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.)						
14	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 6	501(c)(3) organizatio	on,
	check this box and stop here					<u> </u>	
Se	ction C. Computation of Publ	ic Support Per	centage			1	
15	Public support percentage for 2022 (line 8, column (f), c	livided by line 13,	column (f))		15	%
	Public support percentage from 2021					16	<u>%</u>
	ction D. Computation of Inves					1 1	
	Investment income percentage for 2					17	%
	Investment income percentage from					18	%
19:	33 1/3% support tests - 2022. If the						7 is not
	more than 33 1/3%, check this box a						
ŀ	33 1/3% support tests - 2021. If the						and
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check t	his box and see in:	structions	

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.)

	Yes	No
1		
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	143444	province.
2	38.833	44.25(4.25)
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3b		Vision)
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3c		500.00
	No.	W.E
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4h	1	
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5c	95.5	146.65
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9b		
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9c	0.57.75	
10a	!	
10b		1
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Par	t IV Supporting Organizations _(continued)			
			Yes	No
	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	100000000000000000000000000000000000000	W.	
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b	100000000000000000000000000000000000000	
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	0.0000000000000000000000000000000000000		
	detail in Part VI.	11c		
Sec	ion B. Type I Supporting Organizations			
		Caracana an	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	(Andrews	1,011,014	V + 2+ 1 1 1 1
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1 tojdijani		1934
2	Did the organization operate for the benefit of any supported organization other than the supported	Yes and		
	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,	2		
Sac	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations		L	<u> </u>
	don or Type II oupporting organizations		Yes	No
	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	A CONTRACT		1,10
1	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	1		
Sec	the supported organization(s). tion D. All Type III Supporting Organizations		1	<u> </u>
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			14 (1 to 1 to 1 to 1 to 1 to 1 to 1 to 1 t
•	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	Value	general de la companya de la company	100
	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	NAME OF THE PERSON OF THE PERS		
	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			1988
	supported organizations played in this regard.	3	<u> </u>	
Sec	tion 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	}-		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	struction		T
2	Activities Test. Answer lines 2a and 2b below.	Table 18 A	Yes	No
а				
	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	1 100000	1 ***	n saides
	that these activities constituted substantially all of its activities.	2a	1 0 4 A	
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	Acceptable		n anibe
	these activities but for the organization's involvement.	2b	(1600.C)	1 545
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
a		0-	disArdis	1 3000
-	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a_	1 17818	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3b	tal establi	1
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	LUN		

Sche	dule A (Form 990) 2022 SECOND AMENDMENT FOUNDA			91-6184167 Page 6
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Orgar	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyi			Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu-	st complete	Sections A through E.	
Secti	on 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		
Secti	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	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		
	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-function	ally integra	ted Type III supporting org	anization (see

Schedule A (Form 990) 2022

instructions).

91-6184167 Page 7 Schedule A (Form 990) 2022 SECOND AMENDMENT FOUNDATION Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) **Current Year** Section D - Distributions 1 Amounts paid to supported organizations to accomplish exempt purposes 2 Amounts paid to perform activity that directly furthers exempt purposes of supported 2 organizations, in excess of income from activity 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 3 4 4 Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 _5 6 Other distributions (describe in Part VI). See instructions. 6 7 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 9 Distributable amount for 2022 from Section C, line 6 9 10 Line 8 amount divided by line 9 amount (555)

Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(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			
<u>d</u>	From 2020			
<u>e</u>	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)			
i	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2022 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2022 distributable amount			
С	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, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2023. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
a	Excess from 2018			
b	Excess from 2019			
	Excess from 2020			
	Excess from 2021			
€	Excess from 2022			

Schedule A (Form 990) 2022

Part IV, Section A, line 1: Part IV. Sec	Information. Provide lines 1, 2, 3b, 3c, 4b, 4c, 5 tion D, lines 2 and 3; Part I	5a, 6, 9a, 9b, 9c, 11a, 11 V, Section E, lines 1c, 2a	d by Part II, line 10; I b, and 11c; Part IV, ı, 2b, 3a, and 3b; Pa	91-6164 Part II, line 17a or 17b; Part III, lin Section B, lines 1 and 2; Part IV, Int V, line 1; Part V, Section B, lin Int for any additional information	ne 12; Section C, le 1e; Part V,
SCHEDULE A, PART	II, LINE 10,	EXPLANATION	FOR OTHER	INCOME:	
SUBSCRIPTIONS					
2018 AMOUNT: \$	58,666.				
2019 AMOUNT: \$	48,514.				
2020 AMOUNT: \$	1,400.				
2021 AMOUNT: \$	1,370.				
2022 AMOUNT: \$					

SCHEDULE C

(Form 990)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

• ;	Section 501(c)(4), (5), or (6) organizati	ons: Complete Part III.			
Nam	e of organization				Employer identification number
	SECOND A	AMENDMENT FOUNDAT	NOI		91-6184167
Pa	rt I-A Complete if the org	anization is exempt unde	r section 501(c) o	or is a section 527	organization.
1	Provide a description of the organiza	ation's direct and indirect politica	ıl campaign activities ir	n Part IV.	
2	Political campaign activity expenditu	ıres			. \$
3	Volunteer hours for political campaig	gn activities			
_					
$\overline{}$		anization is exempt unde			ф
	Enter the amount of any excise tax i				
	Enter the amount of any excise tax i				
	If the organization incurred a section				
			***************************************		Lifes Lino
Do	If "Yes," describe in Part IV. If I-C Complete if the org	anization is exempt unde	er section 501(c)	except section 50)1(c)(3).
	Enter the amount directly expended				
	Enter the amount directly expended				Ψ
2					œ
	exempt function activities Total exempt function expenditures				. \$
J	line 17b				\$
	Did the filing organization file Form				
4	Enter the names, addresses and en				
J	made payments. For each organizat	tion listed enter the amount paid	from the filing organiz	ation's funds. Also ent	er the amount of political
	contributions received that were pro	emptly and directly delivered to a	separate political orga	nization, such as a ser	parate segregated fund or a
	political action committee (PAC). If				
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fr	om (e) Amount of political
	(a) Hallo	(27, 133, 555	(0,	filing organization	n's contributions received and
				funds. If none, ente	r -0 promptly and directly
					delivered to a separate political organization.
					' If none, enter -0
_					
		i	i	1	ı

Schedule C (Form 990) 2022	SECOND AMENI	DMENT FOUNDA	ATION		184167	
Part II-A Complete if the org	anization is exem	ipt under section	but (c)(3) and file	a rorm 5/68 (ele	cuon unae	er -
section 501(h)).						
	tion belongs to an affili		Part IV each affiliated	group member's name	, address, EIN	٧,
	re of excess lobbying e					
B Check if the filing organiza	tion checked box A an	d "limited control" pro	visions apply.		41 A COV 1 4	
Limi	ts on Lobbying Expen	ditures		(a) Filing organization's	(b) Affiliated totals	
(The term "expend	ditures" means amou	nts paid or incurred.)		totals	(010,10	,
				0.		
1a Total lobbying expenditures to influ				0.		
b Total lobbying expenditures to influ				0.		
c Total lobbying expenditures (add li				· ·		
d Other exempt purpose expenditure	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			0.		
e Total exempt purpose expenditure				0.		
f Lobbying nontaxable amount. Enter			. 1			
If the amount on line 1e, column (a) o	1	bying nontaxable amo	ount is:			
Not over \$500,000		he amount on line 1e.	4500 000			
Over \$500,000 but not over \$1,000		O plus 15% of the exce				
Over \$1,000,000 but not over \$1,5		0 plus 10% of the exce				
Over \$1,500,000 but not over \$17,		O plus 5% of the exces	ss over \$ 1,500,000.			
Over \$17,000,000	\$1,000,0	300.				
Construction and the construction	tor OEO/ of line 16			0.		
g Grassroots nontaxable amount (en						
 h Subtract line 1g from line 1a. If zer i Subtract line 1f from line 1c. If zero 						
j If there is an amount other than ze		ine ti did the organiza			<u> </u>	
reporting section 4911 tax for this				Γ	Yes	No
reporting section 4311 tax for this		raging Period Under				<u></u>
(Some organizations t				of the five columns be	low.	
		ate instructions for lir				
	Lobbying Exper	nditures During 4-Yea	r Averaging Period			
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Tot	tal
(or noon year beginning in)						
2a Lobbying nontaxable amount						
 b Lobbying ceiling amount 						
(150% of line 2a, column(e))						
c Total lobbying expenditures						
d Grassroots nontaxable amount				N 50 N 20 10 N 50 N 50 N 50 N 50 N 50 N 50 N 50		
e Grassroots ceiling amount						
(150% of line 2d, column (e))	College College College				1	
f Grassroots lobbying expenditures					<u> </u>	

Schedule C (Form 990) 2022

Schedule C (Form 990) 2022 SECOND AMENDMENT FOUNDATION 91-61841

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)			(b)	
	o lobbying activity.	Yes	ı	10	Amo	unt
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
a b	Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?		╁			
d	Mailings to members, legislators, or the public?		\vdash			
е	Publications, or published or broadcast statements?		 			
f			 			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		╀			
h i	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?					
j	Total. Add lines 1c through 1i	NEAR SE				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		ļ.,,			
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	Characteristics.				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	n 501(c)(5), c	r sec	tion	
•					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section	e prior year	?	3		
1	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members			1	II A, IIIIC	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political			10.10		
_	expenses for which the section 527(f) tax was paid).					
	Current year			2a		
	Carryover from last year			2b		
	•			2c		
c				3		
3 4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	-AGE		Ť		
4	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p					
	· · · · · · · · · · · · · · · · · · ·			4		
5	expenditures next year? Taxable amount of lobbying and political expenditures. See instructions			5		******
	t IV Supplemental Information	***************************************		1 0	l	
	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	lieth Part II	LΔ liz	nac 1 a	nd 2 (See	
	uctions); and Part II-B. line 1. Also, complete this part for any additional information.	noy, raici	1-7-1 ₅ Ju	103 1 4	114 2 1000	
เกรเก	uctions); and Part II-D, line 1. Also, complete this part for any additional information.					

						·

SCHEDULE D

Supplemental Financial Statements

(Form 990)

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

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Name of the organization

SECOND AMENDMENT FOUNDATION

 $\begin{array}{c} \textbf{Employer identification number} \\ 91-6184167 \end{array}$

Par	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		ar Funds or Ac	Counts. Complete if the
	Organization anomorous (co. c.) c	(a) Donor advised fur	nds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in w		donor advised fun	ds
Ū	are the organization's property, subject to the organization's e			
6	Did the organization inform all grantees, donors, and donor ad			
·	for charitable purposes and not for the benefit of the donor or			
	impermissible private benefit?			
Par				
1	Purpose(s) of conservation easements held by the organization			
•	Preservation of land for public use (for example, recreat		eservation of a hist	orically important land area
	Protection of natural habitat		eservation of a cert	ified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualification	ed conservation contribution	in the form of a co	nservation easement on the last
_	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements		•	2a
b				2b
c	Number of conservation easements on a certified historic stru			2c
d	Number of conservation easements included in (c) acquired a			
u	historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or termi	inated by the organ	
v	year		, ,	Ü
4	Number of states where property subject to conservation eas	ement is located		
5	Does the organization have a written policy regarding the peri		handling of	
J	violations, and enforcement of the conservation easements it			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, i			
Ü	otali and volunteer hours devoted to mersioning, meposting,	in the same of the		•••••••••••••••••••••••••••••••••••••••
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforc	ing conservation ea	asements during the year
		•		
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of	section 170(h)(4)(B	90
	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservation			
	balance sheet, and include, if applicable, the text of the footn			
	organization's accounting for conservation easements.			
Pa	rt III Organizations Maintaining Collections of	Art, Historical Treasu	ires, or Other	Similar 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	e statement and ba	lance sheet works
	of art, historical treasures, or other similar assets held for pub	olic exhibition, education, or	research in furthera	ince of public
	service, provide in Part XIII the text of the footnote to its finar			
b	If the organization elected, as permitted under FASB ASC 95			e sheet works of
	art, historical treasures, or other similar assets held for public			
	provide the following amounts relating to these items:	•		
	(i) Revenue included on Form 990, Part VIII, line 1			\$
2	If the organization received or held works of art, historical tree			
4	the following amounts required to be reported under FASB A			•
_	D			\$
a			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$

Sched		AMENDMENT 1						8 41 67	
Par	III Organizations Maintaining C	ollections of Ar	t, Historical T	reasures, or C	other S	imilar	Assets	(continu	ed)
3	Using the organization's acquisition, accessi	on, and other record	s, check any of th	e following that m	ake signi	ificant u	se of its		
	collection items (check all that apply):								
а	Public exhibition	d	l 🔲 Loan ore	xchange program					
b	Scholarly research	e	Other						
C	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain	n how they furthe	r the organization's	s exempt	t purpos	se in Part :	XIII.	
	During the year, did the organization solicit o								
	to be sold to raise funds rather than to be ma	aintained as part of t	he organization's	collection?] Yes	No
Par	IV Escrow and Custodial Arran	gements. Compl	ete if the organiza	ition answered "Ye	es" on Fo	rm 990	, Part IV, 1	ine 9, or	
	reported an amount on Form 990, Pa								
1a	Is the organization an agent, trustee, custodi	an or other intermed	liary for contribut	ons or other asset	s not inc	luded			
	on Form 990, Part X?						C	Yes	No
	If "Yes," explain the arrangement in Part XIII								
	•	•						Amount	
С	Beginning balance					1c			
	Additions during the year					1d			
	Distributions during the year					1e			
f	Ending balance					1f			
	Did the organization include an amount on F					?		Yes	No No
	If "Yes," explain the arrangement in Part XIII.								
	t V Endowment Funds. Complete	if the organization ar	nswered "Yes" or	Form 990, Part IV	, line 10.				
L		(a) Current year	(b) Prior year				ears back	(e) Four y	ears back
1a	Beginning of year balance		<u> </u>						
	Contributions								,
	Net investment earnings, gains, and losses								•
	Grants or scholarships								
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses								
g	End of year balance			/ N I D I				l	
2	Provide the estimated percentage of the cur		ce (line 1g, columi	n (a)) held as:					
а	Board designated or quasi-endowment		%						
b	Permanent endowment	%							
С	Term endowment	_%							
	The percentages on lines 2a, 2b, and 2c sho								
За	Are there endowment funds not in the posse	ession of the organiz	ation that are hel	d and administered	d for the			Γ.	
	organization by:								Yes No
	(i) Unrelated organizations							3a(i)	
	(ii) Related organizations							3a(ii)	
b	If "Yes" on line 3a(ii), are the related organization	ations listed as requi	ired on Schedule	R?				3b	
4	Describe in Part XIII the intended uses of the		owment funds.						
Pai	t VI Land, Buildings, and Equipn								
	Complete if the organization answere	ed "Yes" on Form 99	0, Part IV, line 11	a. See Form 990, f	⊃art X, Iin	ie 10.			
	Description of property	(a) Cost or	other (b)	Cost or other	(c) Acc	umulat	ed	(d) Book	value
		basis (invest	ment) ba	sis (other)	depr	eciation			
1a	Land								
	Buildings	i i							
	Leasehold improvements	1							
d				325,707.	3:	22,6	14.	3	,093.
	Other	1							
e	L Add lines 1a through 1e. (Column (d) must		t X column (D) III	ne 10c l				3	,093.
TOTA	Lingu mico la micolym le, (Cojumn (d) must	cuuai ruiiii 990. Päh	. A. COMHH 301. III	10 / VU./	***********				

Schedule D (Form 990) 2022

Schedule		2022

Part VII Investments - Other Securities.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line 1	1b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) INVESTMENT IN RADIO			
(B) STATIONS	1,392,399.	COST	
(C) INVESTMENT IN INTERNET	120 014	COCH	
(D) MEDIA WEB SITE	137,814.	COST	
(E)			
(F)			
(G)			
(H)	1 520 212		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related.	1,530,213.		42.53
Complete if the organization answered "Yes"	on Form 990. Part IV. line	11c, See Form 990, Part X, line 13.	•
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1) (2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"		11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
<u>(6)</u>			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.			<u> </u>
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes	*		
(2) RIGHT OF USE OPERATING LE	ASE		26 622
(3) LIABILITY			36,632.
(4)			
<u>(5)</u>			
(6)			
<u>(/)</u>			
(8)			
(9)			36,632.
Total. (Column (b) must equal Form 990. Part X. col. (B) lin	e 25.}	46	
2. Liability for uncertain tax positions. In Part XIII, provide	tne text of the foothote to	o the organization's financial statements t	nat reports the
organization's liability for uncertain tax positions under	FASB ASC 740, Check h	ere ir trie text of trie foothote nas been pr	OVIDED IN CARLAIII

SCHEDULE L

(Form 990)

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

2022

Open To Public Inspection

Name of the organization SECOND	AMENDMEN	T FOU	NDAT	TION			1 7	_	8416		ai siur	mer
Part I Excess Benefit Trans	sactions (sect	ion 501(c)(3), secti	on 501(c)(4), and se			nizatio	ns onl	y).			
Complete if the organization					o, or	Form 990-EZ, Pa	ert V, li	ne 401	b	1		
(a) Name of disqualified person	(b) Relationship	p between o and organiza		fied (c) De	scription of tran	sactio	n			Correc	
(-,	person a	ina organiza	auon	``	·	•				Ye	s	No
										+		
	·									+-	-	
										+-		•
2 Enter the amount of tax incurred by	the organization	managers	or disq	ualified persons du	ring tl	ne year under	,			-		
section 4958												
3 Enter the amount of tax, if any, on I	ine 2, above, rein	nbursed by	the ore	janization				\$				
Part II Loans to and/or From	n Interested	Persons										
Complete if the organization				Part V line 38a or	Form	990 Part IV line	a 26: 6	or if the	a organ	nizatio	'n	
reported an amount on For				rait v, inte ooa or i	Ollin	330, 1 art 14, mil	o 2.0, c	, , ,	c organ	nzauc	""	
(a) Name of (b) Relation		ose (d) L	oan to or	(e) Original	(f)	Balance due	(g)	ln.	(h) App by boa	proved	(i) W	ritten
interested person with organ		n from	m the iization?	principal amount	``			ult?	comm		agree	ment?
		То	From				Yes	No	Yes	No	Yes	No
					ļ							
												ļ
			ļ									
			-		-							
							-	 				
			-		┼			_				
				<u> </u>			33.5	<u> </u>		ANGE	13.00	
Total Part III Grants or Assistance	- Renefiting I	ntereste	d Per		<u> </u>		1				1, 1, 1, 1	
Complete if the organization	_											
(a) Name of interested person		nship betwe		(c) Amount of		(d) Type	of	$\neg T$	{e	Purp	ose of	
(a) Hame of interested person	intereste	d person ar ganization		assistance		assistan				assist		
								\neg				

Schedule L (Form 990) 2022 SECOND	AMENDMENT FOUNDATIO	N	91-6184	167	Page 2
Part IV Business Transactions Involvi					
Complete if the organization answered	"Yes" on Form 990, Part IV, line 28a, 28	3b, or 28c.			
(a) Name of interested person	(b) Relationship between interested	(c) Amount of	(d) Description of	(e) Sha	aring of zation's
	person and the organization	transaction	transaction		ues?
				Yes	No
MERRIL ASSOCIATES	OWNED BY ALAN GOTTL	462,338.	SOLICITATIO		X
ANDREW GOTTLIEB	SON OF ALAN GOTTLIE	78,000.	COMPENSATIO		Х
LIBERTY PARK	OWNED BY ALAN GOTTL		LEASE OFFIC		X
	DAUGHTER IN LAW OF		COMPENSATIO		Х
Part V Supplemental Information.					1
Provide additional information for response	nses to questions on Schedule L (see i	nstructions).			
T TOVICE dedicting anomation for roops	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,			
SCH L, PART IV, BUSINESS T	RANSACTIONS INVOLVIN	G INTERESTE	D PERSONS:		
(A) NAME OF PERSON: MERRIL	<u>አ</u> ደደሰር ተልሞፎደ				
(A) NAME OF THROOM. MERKITE	ADDOCIMIED			••••	••••
(B) RELATIONSHIP BETWEEN I	NTERESTED PERSON AND	ORGANIZATI	ON:		
OWNED BY ALAN GOTTLIEB, DI	RECTOR				
(C) AMOUNT OF TRANSACTION	\$ 462,338.				
(D) DESCRIPTION OF TRANSAC	rion: SOLICITATION O	F BIDS FOR	MAILINGS,		
ACADMENTAGO AND TIOM DENMAT	TNOTITOTIC DAGG MIDOL	CILL DASSMERNING	, wo owned		
MARKETING AND LIST RENTAL,	INCLUDES PASS INCO	GH FAIMBNIC	O TO OTHER		
VENDORS.					
(D) GUADING OF ODGANIZATIO	NI DETTENTITECO _ NO				
(E) SHARING OF ORGANIZATIO	N KEVENUES; = NO				
(A) NAME OF PERSON: ANDREW	GOTTLIEB				
		OBCANTZAMI	CONT.		
(B) RELATIONSHIP BETWEEN I	NTERESTED PERSON AND	ORGANIZATI	LON:		
SON OF ALAN GOTTLIEB, DIRE	CTOR				
(C) AMOUNT OF TRANSACTION	\$ 78,000.				
(D) DESCRIPTION OF TRANSAC	TTON: COMPENSATION				
(E) SHARING OF ORGANIZATIO	N KEVENUES? = NO				
		***************************************	•		
(A) NAME OF PERSON: LIBERT	Y PARK				

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

OWNED BY ALAN GOTTLIEB, DIRECTOR

SCHEDULE 0 (Form 990)

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

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

SECOND AMENDMENT FOUNDATION

Employer identification number 91-6184167

DECOMB 12:DECEMBER 2 COMMITTEE STATE
FORM 990, PART VI, SECTION A, LINE 6:
INDIVIDUALS MAY BECOME CONTRIBUTING MEMBERS OF THE ORGANIZATION WITH NO
VOTING RIGHTS.
FORM 990, PART VI, SECTION B, LINE 11B:
A COPY OF FORM 990 AND THE AUDITED FINANCIAL STATEMENTS ARE GIVEN TO EACH
BOARD MEMBER FOR REVIEW AFTER FILING OF THE FORM 990. THE FORM AND THE
AUDITED FINANCIAL STATEMENTS ARE DISCUSSED AT THE NEXT BOARD MEETING AND
APPROVED.
FORM 990, PART VI, SECTION B, LINE 12C:
EACH BOARD MEMBER IS COVERED BY THE POLICY AND IS REQUIRED TO READ THE
CONFLICT OF INTEREST POLICY AND SIGN IT. THE BOARD DETERMINES IF A
CONFLICT OF INTEREST EXISTS. IF THERE IS A CONFLICT OF INTEREST, THE
MATTER WOULD BE DISCLOSED TO THE BOARD. AS SUCH, THE BOARD REVIEWS THE
MATTER AND COULD EITHER MAKE THE BOARD MEMBER WITH THE CONFLICT INELIGIBLE
TO VOTE OR THE BOARD MEMBER COULD RECUSE HIM OR HERSELF FROM VOTES THAT MAY
PERTAIN TO THE CAUSE OF THE CONFLICT. THIS POLICY IS MONITORED BY RENEWING
IT ANNUALLY AND BY VOLUTARY DISCLOSURE BY BOARD MEMBERS SHOULD A CONFLICT
ARISE.
FORM 990, PART VI, SECTION B, LINE 15:
ALL COMPENSATION DECISIONS ARE REVEIWED AND APPROVED BY THE BOARD.
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:
WA,OR,PA,MN,OH,WV,UT,IL,FL,WI,MD,ME,SC,KY,NM,NJ,NY,NC

Schedule O (Form 990) 2022	Page 2
Name of the organization SECOND AMENDMENT FOUNDATION	Employer identification number 91-6184167
SECOND AMENDMENT FOUNDATION	<u> </u>
FORM 990, PART VI, SECTION C, LINE 19:	
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINAN	CIAL STATEMENTS
ARE AVAILABLE UPON WRITTEN REQUEST.	
FORM 990 PART IV	
FORM 990 PART IV AN IRS SECTION 501(H) ELECTION WAS MADE E	Y THE
FOUNDATION. NO LOBBYING EXPENDITURES HAVE BEEN MADE BY THE	FOUNDATION.
,	
:	

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.

2022 Open to Public Inspection Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury Internal Revenue Service Name of the organization

SECOND AMENDMENT FOUNDATION

Employer identification number 91-6184167

OMB No. 1545-0047

(a)	(b)	(c)	(d)	(e)		-	(f)	
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state o foreign country)				Direct control entity		g

identification of Related Tax-Exempt Organiz organizations during the tax year.	zations. Complete if the organization	answered "Yes" on Form 990	, Part IV, line 34, i	pecause it had one	or more	related tax-exer	npt	
Identification of Related Tax-Exempt Organiz organizations during the tax year. (a) Name, address, and EIN of related organization	zations. Complete if the organization (b) Primary activity	answered "Yes" on Form 990 (c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	Direc	(f) ot controlling entity	Section conf	g) 512(b) Irolled tity?
organizations during the tax year. (a) Name, address, and EIN	(b)	(c) Legal domicile (state or	(d) Exempt Code	(e) Public charity	Direc	(f) et controlling	Section conf	Irolled
organizations during the tax year. (a) Name, address, and EIN	(b)	(c) Legal domicile (state or	(d) Exempt Code	(e) Public charity status (if section	Direc	(f) et controlling	Section conf	tity?
organizations during the tax year. (a) Name, address, and EIN	(b)	(c) Legal domicile (state or	(d) Exempt Code	(e) Public charity status (if section	Direc	(f) et controlling	Section conf	tity?
organizations during the tax year. (a) Name, address, and EIN	(b)	(c) Legal domicile (state or	(d) Exempt Code	(e) Public charity status (if section	Direc	(f) et controlling	Section conf	tity?

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2022

232161 09-14-22 LHA

Page 2

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

organizacións coucos do a par		.,									
(a)	(b)	(c)	{d}	(e)	(f)	(g)	(1	h)	(i)	(i)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	Disprop alloca	ortionate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Genera manag partne	Percentage ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes	0
										1 1	
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•	1						1				
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		•									

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicite (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	512(l cont ant	tion b)(13) rolled bity?
KSBN RADIO, INC 91-1669197 12500 NE 10TH PL BELLEVUE, WA 98005-2532	BROADCAST RADIO	WA	N/A	C CORP	41,240.	144,245.	50.00%		x
KITZ RADIO, INC 91-2019576 12500 NE 10TH PL BELLEVUE, WA 98005-2532	BROADCAST RADIO STATIONS		V/A	C CORP	60,065.	417,756.			x
KEEPANDBEARARMS, COM - 20-1551728 12500 NE 10TH PL BELLEVUE, WA 98005-2532	INTERNET WEBSITE	WA	N/A	C CORP	6,000.	549,	50,00%		x
KENF RADIO INC - 91-1420974 12500 NE 10TH PL BELLEVUE, WA 98005-2532	BROADCAST RADIO STATION	WA	N/A	C CORP	81,048.	140,152.	50.00%		x

Schedule R (Form 990) 2022

232162 09-14-22

Schedule R (Form 990) 2022

(5)

232163 09-14-22

Part V. Transactions With Related Organizations. Complete if the organization answered *Yes" on Form 990, Part IV, line 34, 35b, or 36. Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. Yes No 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity 1a X b Gift, grant, or capital contribution to related organization(s) 1b c Gift, grant, or capital contribution from related organization(s) 10 d Loans or loan guarantees to or for related organization(s) 1d e Loans or loan guarantees by related organization(s) 1e f Dividends from related organization(s) g Sale of assets to related organization(s) 1a h Purchase of assets from related organization(s) 1h Exchange of assets with related organization(s) 1ì j Lease of facilities, equipment, or other assets to related organization(s) 1] k Lease of facilities, equipment, or other assets from related organization(s) Performance of services or membership or fundraising solicitations for related organization(s) 11 m Performance of services or membership or fundraising solicitations by related organization(s) 1m n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) 1n o Sharing of paid employees with related organization(s) 10 p Reimbursement paid to related organization(s) for expenses 1p q Reimbursement paid by related organization(s) for expenses 1q r Other transfer of cash or property to related organization(s) s Other transfer of cash or property from related organization(s) 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. (c) Amount involved (a) Name of related organization (b) (d) Method of determining amount involved Transaction type (a-s) (3) (4)

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a)	(b)	(c)	(d)	Are Partne 501(6rg	<u>-</u> }_	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related, unrelated, excluded from tax under sections 512-514)	partna Partna	EN ES SEC.	Share of	Share of	Disp	opar-	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Сепе	rai or	Percentage
of entity		(state or foreign	(felated, unrelated, excluded from tax under)100 010	c)(3)	total	end-of-year	alleca 2	ions ?	amount in box 20 of Schedule K-1	parti	ging ter	ownership
		country)	sections 512-514)	Yes	Νo	income	assets	Yes	Νo	(Form 1065)	Yes	No	
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Schedule R (Form 990) 2022

2022 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

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ORM 9	0 PAGE 10							990							
Asset No.	Description	Date Acquired	Method	Life	Cocy	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
1	PROGRAM SERVICES GUNWEEK ASSETS * 990 PAGE 10 TOTAL PROGRAM	VARIOUS	VAR	.000	ну	16	151,300.	A BANKS		ANGELANI	151,300.	151,300.		**************************************	151,300.
	SERVICES MANAGEMENT AND GENERAL				1888		151,300.				151,300.	151,300.		0.	151,300.
2 3	VARIOUS COMPUTER EQUIPMENT	VARIOUS 05/10/02	VAR SL	,000 3,00		16 16	233,805. 7,800.	53.41 53.55			233,805. 7,800.	233,805. 7,800.		0.	233,805. 7,800.
4 5	COMPUTER EQUIPMENT	06/15/02 09/02/03	A LANG	5,00 5,00	1400	16 16	2,282. 1,536.	VIAT HENR			2,282. 1,536.	2,282. 1,536.		0. 0.	2,282. 1,536.
6 7	COMPUTER EQUIPMENT	06/15/04 08/01/04		5.00 3.00	228	16 16	3,824. 4,401.	evenille Venille			3,824. 4,401.	3,824. 4,401.		0. 33.55.55 4.55.60	3,824. 4,401.
8	COMPUTER SONY VGN 5 DESKTOP & 1 LAPTOP	05/01/05 06/01/05		5.00 5.00		16 16	2,394. 4,177.				2,394. 4,177.	2,394. 4,177.		0.	2,394, 4,177,
10 11	3 DESKTOP COMPUTERS COMPUTER EQUIPMENT	06/01/05		5,00 5,00	A Section	16 16	1,943, 1,083.				1,943. 1,083.	1,943. 1,083.		0.	1,943. 1,083.
12 13	COMPUTER EQUIPMENT LAPTOP COMPUTER	04/01/06	MARK.	5,00 5,00		16 16	1,667. 7,011.				1,667. 7,011.	1,667. 7,011.		c. 0.	1,667. 7,011.
14 15	COMPUTER EQUIPMENT COMPUTER EQUIPMENT	02/01/08		3.00 5.00	2,4232	16 16	12,772. 5,869.	7.15 to 10.15		12,772. 5,869.	12,772. 5,869.		o.	12,772. 5,869.	

228111 04-01-22

(D) · Asset disposed

*ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2022 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

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ORM 9	90 PAGE 10							990							
Asset No.	Description	Date Acquired	Method	Life	Cocy	Line No,	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
16 17	COMPUTER EQUIPMENT	03/01/08 01/01/09		5.00 5.00		16 16	1,806. 3,630.				1,806. 3,630.	1,806. 3,630.		0.	1,806. 3,630.
18 19	COMPUTER EQUIPMENT GUN WEEK	12/31/09 10/01/10		5.00 5.00	å	16 16	5,374. 2,628.				5,374. 2,628.	5,374. 2,586.		°.	
20 21	COPIER TELEPHONE SYSTEM	11/01/05 11/01/12		5,00 5,00		16 16	795. 2,425.				795. 2,425.	795. 2,425.		o. o.	795. 2,425.
22 23	2 CHAIRS DELL SERVER	01/01/13 02/15/13		3.00 5.00		16 16	175. 2,020.				175. 2,020.	175. 2,020.		0.	
24 25	DELL SERVER COMPUTER EQUIPMENT	05/20/14 03/15/19		5,00 5,00	i i	16 16	5,855. 12,711.	(N)			5,855. 12,711.	5,855. 10,401.		0. 2,310.	5,855. 12,711.
	* 990 PAGE 10 TOTAL MANAGEMENT AND GENERAL * GRAND TOTAL 990 PAGE 10 DEFR					0.000	327,983. 479,283.				327,983. 479,283.	325,631. 476,931.		2,310. 2,310.	
		eraliani Villinii													

228111 04-01-22

(D) - Asset disposed

*ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone