As Filed Data efile GRAPHIC print - DO NOT PROCESS DLN: 93492067009011 Short Form OMB No. 1545-1150 Form 990EZ Return of Organization Exempt From Income Tax 2020 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Open to ▶ Do not enter social security numbers on this form as it may be made public. Department of the **Public** Treasury ► Go to www.irs.gov/Form990EZ for instructions and the latest information. Inspection Internal Revenue Service A For the 2020 calendar year, or tax year beginning 01-01-2020, and ending 12-31-2020 **B** Check if applicable: C Name of organization D Employer identification number GARDERE INITIATIVE INC ☐ Address change 47-1391639 ☐ Name change Number and street (or P. O. box, if mail is not delivered to street address) Room/suite E Telephone number ☐ Initial return 8435 Ned Avenue Apt A ☐ Final return/terminated (225) 769-0305 City or town, state or province, country, and ZIP or foreign postal code ☐ Amended return F Group Exemption Baton Rouge, LA 70820 ☐ Application pending Number Check ▶ ☐ if the organization is **not** G Accounting Method: ☐ Cash ☑ Accrual Other (specify) ▶ required to attach Schedule B (Form 990, 990-EZ, or 990-PF). I Website: ▶www.gardereinitiative.org J Tax-exempt status (check only one) - ☑ 501(c)(3) ☑ ☐ 501(c)() ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527 **K** Form of organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Check if the organization used Schedule O to respond to any question in this Part I 1 Contributions, gifts, grants, and similar amounts received 26,033 2 43,453 Program service revenue including government fees and contracts 2 3 3 0 Membership dues and assessments 4 4 0 5a Gross amount from sale of assets other than inventory 0 b Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . 5c C 6 Gaming and fundraising events Revenue Gross income from gaming (attach Schedule G if greater than \$15,000) 0 Gross income from fundraising events (not including \$ 0 of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) Less: direct expenses from gaming and fundraising events 60 0 d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) 6d 7a Gross sales of inventory, less returns and allowances . 0 b Less: cost of goods sold Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . 7c n C 8 Other revenue (describe in Schedule O) 8 0 9 9 **Total revenue.** Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 . . . 69,486 10 10 Grants and similar amounts paid (list in Schedule O) . 11 Benefits paid to or for members 11 0 34,705 12 Salaries, other compensation, and employee benefits . 12 Expenses 13 13 9,050 Professional fees and other payments to independent contractors 14 13,172 14 Occupancy, rent, utilities, and maintenance . 15 Printing, publications, postage, and shipping. 15 4,206 16 16 6,847 Other expenses (describe in Schedule O) 17 Total expenses. Add lines 10 through 16 17 67,980 18 18 1,506 Excess or (deficit) for the year (Subtract line 17 from line 9) Net Assets 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 19 16,157 20 20 1,475 Other changes in net assets or fund balances (explain in Schedule O) . 21 Net assets or fund balances at end of year. Combine lines 18 through 20 21 19,138 For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 10642I Form 990-EZ (2020)

Part II	Balance Sheets (see the instruction Check if the organization used Schedule		nuestion in this Part II			
			·	Beginning of year		(B) End of year
22 Cash, sa	vings, and investments			16,157	22	19,138
	d buildings			C	+-+	0
24 Other as	sets (describe in Schedule O)			C	24	0
25 Total as	sets			16,157	25	19,138
26 Total lia	ibilities (describe in Schedule O)			C	26	0
27 Net ass	ets or fund balances (line 27 of column	(B) must agree with	line 21)	16,157	27	19,138
Part Ⅲ	Statement of Program Service	Accomplishments	(see the instructions for F	Part III)	Τ	Expenses
	Check if the organization used Schedule	O to respond to any o	question in this Part II:			equired for section 501(c)
	organization's primary exempt purpose?		d			and 501(c)(4) anizations; optional for
	substance abuse and other social ills in th and the city in general through collabora			aren, neignboring	oth	ers.)
Describe the	organization's program service accompl	shments for each of its	s three largest prograr	n services, as	_	
	expenses. In a clear and concise manne		es provided, the number	er of persons		
28	nd other relevant information for each pr	ogram title.			+	
	al Data Table					
(Grants \$)	If this amour	nt includes foreign gran	nts, check here	. ▶ □	28a	
	tional Data Table		,		29a	
	······································					
(Grants \$)	If this amoun	nt includes foreign gran	nts check here	. • 🗆		
		The includes for eight gran	its, check here	. , ,	20-	
30 See Addi	tional Data Table				30a	
(Grants \$)	If this amour	nt includes foreign gran	nts, check here	. ▶ ⊔		
31 Other pr	ogram services (describe in Schedule O)			· · <u>·</u> ·		
(Grants \$)		nt includes foreign gran		. ▶ 🗆	31a	
	ogram service expenses (add lines 28				32	67,980
Part IV	List of Officers, Directors, Trustees, Check if the organization used Schedule					
	Check if the organization used Schedule	e o to respond to any t	question in this Part IV		• •	🗆
	(a) Name and title	(b) Average	(c) Reportable	(d) Health ben	efits,	(e) Estimated amount
		hours per week	compensation (Forms W-2/1099-			e of other compensation
		devoted to position	MISC) (if not paid,	benefit plans, deferred comper		
			enter -0-)	·		
Geraldine Co	pleman	5)	(0
Neighborhoo	od Resident					
Carol Goldsr		5			(0
Faith-Based James Villas		10	,)	(0
Jailles Villas		10	,	'	,	'
Gardere Pro	perty Owner					
Liz Koh		5)	(0
Media:. WAF	B Morning Show					
Joel Scales		5)	(0
Business						
				+		
				+		

Pai	Other Information (Note the Schedule A and personal benefit contract statement requirements			
	instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V	• • •		
22	Did the appointing appear in any significant activity, not appeared, as more than IRC2 If "Vac " appoint a		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		No
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy			
	of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions.	34		No
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business			
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		No
	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		No
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		No
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a			
b	Did the organization file Form 1120-POL for this year?	37b		No
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		No
b	If "Yes," complete Schedule L, Part II and enter the total amount involved . 38b			
39	Section 501(c)(7) organizations. Enter:]		
а	Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities]		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:			
	section 4911 ▶			
b	Section $501(c)(3)$, $501(c)(4)$, and $501(c)(29)$ organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		No
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections4912, 4955, and 4958)		
d	Section $501(c)(3)$, $501(c)(4)$, and $501(c)(29)$ organizations. Enter amount of tax on line 40c reimbursed by the organization			
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		No
	List the states with which a copy of this return is filed. 🕨 🔼			
42a	The organization's books are in care of ▶ John Monu Telephone r	o. ► <u>(22</u>	25) 767-4	1 512
	Located at ▶ 8435 Ned Avenue Apt A Baton Rouge , LA ZIP + 4 ▶	70820		
			Yes	No
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		No
	If "Yes," enter the name of the foreign country:			
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial			
•	Accounts (FBAR). At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		No
·		420		
	If "Yes," enter the name of the foreign country: Southern 4047(a)(1) and a country to be wished a broad of file of Farms 4047.		. .	
	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here	•	▶ □	
	and enter the amount of tax-exempt interest received or accrued during the tax year			
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead	\Box	Yes	<u>No</u>
	of Form 990-EZ	44a		No
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		No
c Did the organization receive any payments for indoor tanning services during the year?				No
d If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an				
1 5-	explanation in Schedule 0	44d		NI-
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		No
45D	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b		No

									Page
								Yes	No
	organization engage, directly or indirect es for public office? If "Yes," complete t					to	46		No
All	ection 501(c)(3) Organizations I section 501(c)(3) organizations r	nust answer question	ons 47- 49b and	52, and	complete	the table	for lir	nes 50	and 5
Ch	neck if the organization used Schedule (O to respond to any qu	uestion in this Part	VI			· · ·	Yes	No
	organization engage in lobbying activitio complete Schedule C, Part II	es or have a section 50	01(h) election in ef	fect durin	g the tax ye	ar?	47		No
·	ganization a school as described in sec	ion 170(b)(1)(A)(ii)2	If "Ves " complete	 Schadula	 E		48		No
	organization make any transfers to an e	. , , , , , ,	, ,				49a		No
	was the related organization a section	·					49b		
	e this table for the organization's five h						and key	employ	ees)
	h received more than \$100,000 of com	pensation from the org	ganization. If there (c) Reportable		enter "None d) Health b		(e) Es	timated	amour
	. ,	hours per week devoted to position	compensation (Forms W-2/109 MISC)	cont	ributions to benefit plan ferred comp	s, and ´	of othe	er comp	ensatio
NE									
f Total ni	umber of other employees paid over \$1	00 000							
Cl						· •	410	0.000 -	
	e this table for the organization's five h sation from the organization. If there is	ighest compensated ir	dependent contrac	· · ctors who	• • • each receiv	ed more th	ıan \$10	0,000 o	<u>—</u> F
		ighest compensated ir none, enter "None."	•		each receiv			0,000 o	
compens	sation from the organization. If there is	ighest compensated ir none, enter "None."	•						
compens	sation from the organization. If there is	ighest compensated ir none, enter "None."	•						
compens	sation from the organization. If there is	ighest compensated ir none, enter "None."	•						
compens	sation from the organization. If there is	ighest compensated ir none, enter "None."	•						
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compens	sation from the organization. If there is	ighest compensated ir none, enter "None."	•						
compens	sation from the organization. If there is	ighest compensated ir none, enter "None."	•						
compens NE	sation from the organization. If there is (a) Name and business address of each	ighest compensated ir none, enter "None." ach independent contr	actor	(b)	Type of serv				
compens NE	sation from the organization. If there is	ighest compensated ir none, enter "None." ach independent contr	actor	(b)	Type of serv				
d Total no	sation from the organization. If there is (a) Name and business address of each	ighest compensated ir none, enter "None." ach independent contract in the second in t	\$100,000 c)(3) organizations	(b)	Type of serv	ice (c)) Compe	ensation	
d Total not be completed by the complete by th	umber of other independent contractor e organization complete Schedule A? Neted Schedule A	ighest compensated ir none, enter "None." ach independent contract in the second of t	\$100,000	must atta	Type of serv	nents, and	Compe	ensation	
d Total not complete	umber of other independent contractor e organization complete Schedule A? Neted Schedule A	ighest compensated ir none, enter "None." ach independent contract in the second of t	\$100,000	must atta	Type of serv	nents, and	Compe	ensation	
d Total not Did the complete der penalties wiedge and any knowle	umber of other independent contractor e organization complete Schedule A? Neted Schedule A	ighest compensated ir none, enter "None." ach independent contract in the second of t	\$100,000	must atta	Type of serv	nents, and	Compe	ensation	
d Total nu Did the complete penalties whedge and any knowle	umber of other independent contractor e organization complete Schedule A? Neted Schedule A	ighest compensated ir none, enter "None." ach independent contract in the second of t	\$100,000	must atta	rype of serv	nents, and	Compe	ensation	
d Total nu Did the complete penalties whedge and any knowle	umber of other independent contractor e organization complete Schedule A? Neted Schedule A	ighest compensated ir none, enter "None." ach independent contract in the second of t	\$100,000	must atta	rype of serv	nents, and formation	Compe	ensation	
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d Total not provided the penalties whedge and any knowledge and any knowledge and any knowledge and a complete penalties when the penalties when the penalties and the penalties are the penalties and the penalties are the penalti	umber of other independent contractor e organization complete Schedule A? Neted Schedule A	ighest compensated ir none, enter "None." ach independent contr. s each receiving over: OTE. All section 501(\$100,000	must atta	rype of serv	nents, and formation	Compe	ensation	
d Total nucleon of the complex of th	umber of other independent contractor e organization complete Schedule A? Neted Schedule A	ighest compensated ir none, enter "None." ach independent contr. s each receiving over: OTE. All section 501(\$100,000	must atta	rype of serv	nents, and formation	Compe	ensation	

Additional Data

Software ID: 20012124

Software Version: v1.00

EIN: 47-1391639

Name: GARDERE INITIATIVE INC

Form 990EZ, Part III - Statement of Program Service Accomplishments

services, as measured by expense	ram service accomplishments for each of its three largest program es. In a clear and concise manner, describe the services provided, the d other relevant information for each program title.	Expenses (Required for section 50 (c)(3) and 501(c)(4) organizations; optional for others.)		
Glasgow, Westdale Middle and Mckinl names on rocks with average attenda 30.38 and an array of resourceful pre community for all its residents" * Gar exposure to persons from various pro average attendance of 30.4 and mea nvolved math, reading, music, LSU N the provision of breakfast, lunch and	In prayer initially with prayer in front of Magnolia Woods, Highland Elementary, ley High followed by emphasis on the children and the community via painting ance of 13. * Gardere Initiative Monthly meetings with average attendance of esenters that moves us toward our vision "Gardere is a safe and healthy rdere Youth Coalition (GYC) monthly meetings focusing on career paths, ofessions, voter registration culminating with Lock-in at Faith Chapel with an Is provided by the Les Vignerons. * Eight-week Summer Program that Museum of Art, Community Police Officers serving 110 residents. Also included the delivery of 8,000 take home brown bags/sack lunches coordinated by from Leila Banner and the Ascension Parish youth. William Brown introduced ent for GYC workers	28 a	0	
(Grants \$ 0)	If this amount includes foreign grants, check here \dots			

orm 990EZ, Part III - Statement of Program Service Accomplishments				
Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.	Expenses (Required for section 501 (c)(3) and 501(c)(4) organizations; optional for others.)			
**Offers After-School tutoring to approximately 25 students, M-TH, 3:30-6pm, during the school year with qualified math teachers, student volunteers from Southern University and LSU, and other volunteers from the Baton Rouge area. **Serving over 100 children and youth during the three-day EBR Spring Break with Front yard Bikes, full display of EBRSO's equipment including helicopter, April 2-4) **Treated 20 children during EBR Fall Break with Skating and Bowling at Mt. Pilgrim Baptist Church. **Served 100 children/youth during two-day Thanksgiving Break with Frontyard Bikes and DEA's Chasing the Dragon movie. **MLK Celebration with presentation from physicians "Pulse3 of Perseverance", hanging "Be Respectful" signs throughout the community. **Grand Opening of the \$350,000 renovated Gardere Lane Hartley-Vey Park, August **Dr. Broussard's LSU Public Relations Class Projects (Spring & Fall Semesters) that included a renovation of the Gardere site in the Spring and a Community Day in the park, November 16 with 65 participants. **St. John's Methodist Church becomes a Gardere Initiative Stakeholder and hosted SAMHSA visit. **Annual Community Meeting at Aposento Alto with representation from EBR Sheriff's Office, District Attorney's Office, Crime Stoppers, EBR School District **Frontyard Bikes receives funding to establish site at Gardere's Hartley-Vey Park, Tuesdays & Thursday, 3:30-5:30, beginning, January 22, 2019 **Established as a VISTA site with English & Spanish-Speaking Volunteer positions and hiring 9 Summer Associates **Collaborated with the Mayor's Office to hire 10 youths for the Summer Program **Collaborated with EBR Sheriff's Office to host the 12th Annual Trick or Treating with the Deputies	29a	0		

If this amount includes foreign grants, check here $\ . \ . \ . \ \blacktriangleright \ \Box$

(Grants \$ 0)

orm 990EZ, Part III - Statement of Program Service Accomplishments					
Describe the organization's program service accomplishments for each of its three la					
services, as measured by expenses. In a clear and concise manner, describe the servi					

services, as measured by expense	am service accomplishments for each of its three largest program is. In a clear and concise manner, describe the services provided, the other relevant information for each program title.	(c	Expenses quired for section 501)(3) and 501(c)(4) panizations; optional for others.)
Annual Love Fest at Aposento Alto wit Department, District Attorney's Office, food, drinks and information * Collabo 200 in attendance daily * Transported Foundation Funding for Math After-Schmiscellaneous activities. * Began relat Aposento Alto, First Monday's With McFall 2018 thanks to Znaidia Brown * Tthe Gardere Office. * Gardere Initiative initiative says Goodbye to Captain Steaddition of a 3rd unit to provide neede Baton Rouge sports team that showed Program for 10 girls, coordinated by Jacapitol, swim lessons and exposure to Summer Program. "Gardere is a Be Ki signed "Be Kind" Pledges * Serve as a 1-4 years), 4 books from Noodle Soupcan change the world; indeed, it's the	Extravaganza with distribution of 700 school supply kits * Hosted 12th h distribution of 400 gifts * EBR Sheriff's Office, Baton Rouge Police, and Truce Crusade in the Gardere Community, May 24 with distribution of orated with SportsQuest Summer Program, June 25-29, 5:00-7pm, with over 102 children/youth to Crawfish Aquatics, July 9-12 and July 16-19 * Wilson hool and Summer Tutoring and contributions from Regions, ExxonMobil for tionship with South Baton Rouge Presbyterian via establishing ESL classes at ome and Monthly Meetings * Offered ESL classes at the Gardere Office during aken initial steps to establish monthly evening meetings with Latino moms at the welcomes Latino EBRSO Community Deputy Jennifer Gonzalez * Gardere evens and Welcomes Captain Fredrick Thomas * Thanks to Riverland for the led space for program activities * Developed relationship with Louisiana Rugby I up for demonstrations during our EBR Spring Break. * Third Empowerment ane Chandler and Karen Lee that included a trip to the Mayor's Office, State of an array of professionals * Launched a "Be Kind" Campaign during the not Place" hangs on the front doors of our units. Children and youth and a "Carmen's Bookshelf" site for Jeanie Liehe who began with 10 children (ages only thing that ever has." Margaret Mead Accomplishments achieved lers, partners, collaborators and a wonderful staff of 3FTE. If this amount includes foreign grants, check here		0

Form 990EZ, Part III - Statement of Program Service Accomplishments				
		Expenses (Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)		
* First Mondays With Moms (September - May) focus on prayer initially with prayer in front of Magnolia Woods, Highland Elementary, Glasgow, Westdale Middle and McKinley High followed by emphasis on the children and the community with average attendance of 9. * Gardere Initiative Monthly Meetings with average attendance of 32 and an array of resourceful presenters that moves us toward our vision "Gardere is a safe and healthy community for all its residents" * Gardere Youth Coalition monthly meetings focusing on career paths, exposure to persons from various professions, sleep-over, swim outing and mingling with other similar groups. Average attendance 43. * Sixth Annual Summer Program that involved math, reading, music, LSU Museum of Art, Community Police Unit, BREC on the GEAUX; average daily attendance 92. Collaborated with the Mayor's Office to hire 10 youths for the Summer Program and 9 VISTA Associates Including two-week Swim Lessons at Crawfish Aguatics 110		0		

If this amount includes foreign grants, check here \cdot . \cdot \blacktriangleright \Box

(Grants \$ 0)

rm 990EZ, Part III - Statement of Program Service Accomplishments
escribe the organization's program service accomplishments for each of its three largest program ervices, as measured by expenses. In a clear and concise manner, describe the services provided,

Describe the organization's program services, as measured by expenses number of persons benefited, and o	501	Expenses Required for section L(c)(3) and 501(c)(4) ganizations; optional for others.)	
Christmas & New Year Break with Skati Frontyard Bikes Neighborhood Ride 88 School 95 * Dr. Broussard's LSU Public South Baton Rouge Presbyterian Churcl Aposento Alto with representation from District * Frontyard Bikes stations conta Diffice to host the 14th Annual Trick or Extravaganza with distribution of 700 s Aposento Alto with distribution of 1100	5:30pm, M-Th, funded by Wilson Foundation, average attendance 40 * ng and Bowling at Mt. Pilgrim Baptist Church 100 * Thanksgiving Break with * MLK Celebration with LSU Museum of Art, Gardere Community Christian Relations Class Projects (Spring & Fall) Community Day in the Park 96 * n becomes a Gardere Initiative Stakeholder * Annual Community Meeting at EBR Sheriff's Office, District Attorney's Office, Crime Stoppers, EBR School ainer onsite in Gardere's Hartley-Vey Park * Collaborated with EBR Sheriff's Treating with the Deputies * Hosted 13th Annual Back to School chool supply kits 845 attendance * Hosted 13th Annual Love Fest at gifts; thanks Leila & group from Ascension Parish. 531 registered; 593 total Rolling Store with 42 attendance including the Mayor.		21,635

I	Form 990EZ, Part III - Statement of Program Service Accomplishments		
	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.	501	Expenses Required for section (c)(3) and 501(c)(4) ganizations; optional for others.)
			24.585

	-
	24,585
* Hosted Pennington's First Rolling Store with 42 attendance including the Mayor. * CommUNITY Garden (Carla	
Moye, Miesha Smith, Charles Manchester, Edgar Hopkins)in partnership with Fullness Organic Farm (Grant &	
Allison) & South Presbyterian meets monthly on the first Mondays at 5pm, average attendance 11 2018 Services	
provided based on daily sign in sheets 92,177 minutes 1,536.28 hours Education 125 visits After school 2 visits	
book search 15 visits HISET HS 2 visits books for laundry 7 visits mentoring 22 visits school Community Service 1	
visit \$5 transport 1 vist AA list 3 visits assistance financial 2 visits Auto service, charge battery 1 visit budgeting 27	
visits Business development 16 visits community service 2 visits community discussion 4 visits counseling, listening	
18 visits donations 2 visits flood relief 12 visits housing assistance 52 visits Jobs 4 visits personal assistance 3 visits	
counsel 2 visit medicaid application 9 visits meetings 8 visits POL HIV 2 visits report crime 2 visits request police 90	
visits safe place 8 visits SNAP 5 visits summer program 6 visits survey 5 visits tax retrun	

If this amount includes foreign grants, check here $\ . \ . \ . \ \blacktriangleright \ \Box$ (Grants \$ 0)

orm 990EZ, Part III - Statement of Program Service Accomplishments						
Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.	Expenses (Required for section 501(c)(3) and 501(c)(4 organizations; optional for others.)					
January 20 Monday, Dr. Martin Luther King, Jr. Day of Service with speakers, Census job applications, graduation challenge and community gardening. Many will remember 2020 as a year that ushered in COVID-19 resulting in school closures, virtual and hybrid learning, social distancing, face masks, zoom meetings and, unfortunately, the passing of loved ones. Despite these challenges, the Gardere Initiative turned "lemons to lemonade." Challenges brought opportunities to strengthen bonds with many volunteers to serve over 700 children almost daily from March to June and then weekly through August in collaboration with the East Baton Rouge Parish School District, Dr. Nadine Mann, South Burbank Crime Prevention and Development District, Faith Chapel, Aposento Alto, Chapel on the Oaks and others! Congregations and individuals donated toilet tissue, paper towels, other personal items along with Bible material and crayons for the children. 2020 will be remembered for meeting the needs of a community. The installation of our quarter-mile walking trail in the Hartley/Vey Park challenged about 15 youth to incrementally increase their walking from a quarter-mile to 3 miles during the month of July. Partnering with Big Buddy, Knock Knock Museum, South Baton Rouge Presbyterian Church, and LSU Museum of Arts enabled us to distribute art supplies to hundreds of children throughout Phases 1 & 2. Front Yard Bikes delivered 27 new bikes while teaching basic mechanical skills. When the Fall 2020 school year began with virtual learning, our EBR principals responded to requests for personal hotspots for our Center as well as students who had not responded to school surveys. BREC immediately provided additional internet access to enhance our ability to assist students from 9 different schools. LSU's Dr. Broussard's Public Relations class solicited Spanish-speaking volunteers that were sorely needed for our Spanish-speaking students whom many had not spoken English since school closed in March. Our academic efforts have not matched gra	21,760					

caring community that gives HOPE! * Gardere Initiative Monthly Meetings were live in January and February, virtual for March to December with an array of resourceful presenters that moves us toward our vision "Gardere is a safe and healthy community for all its residents" * June-July Summer Program involved 20 youth, various activities and reading of "The Hate You Give." * Thanksqiving, Christmas & New Year Break activities for approximately 20 youth * CommUNITY Garden in partnership with Fullness Organic Farm & South Presbyterian meets monthly on the first Mondays at 5pm

If this amount includes foreign grants, check here . . .

(Grants \$ 0)

efile GRAPHIC print - DO NO			it - DO NOT PROCESS	As Filed Data -			DLN: 9	3492067009011
SCI	I FD	ULE A	Public	Charity Statu	s and Dul	hlic Sunn	ort	OMB No. 1545-0047
(F 000			Complete if the	organization is a sect 4947(a)(1) nonexe ▶ Attach to Form	ion 501(c)(3) e empt charitable 990 or Form 99	organization or trust. 00-EZ.	r a section	2020
		the Treasury	► Go to <u>www.ii</u>	<u>rs.gov/Form990</u> for i	nstructions and	I the latest info	ormation.	Open to Public Inspection
Nam	e of th	ne organiza TIATIVE INC	tion				Employer identific	ation number
							47-1391639	
	rt I		for Public Charity Sta private foundation because				See instructions.	
1	rgariiz		onvention of churches, or a	•	•		(A)(i)	
2		·	,					
			scribed in section 170(b)		,	, ,		
3		·	r a cooperative hospital se	-			•	orke orkland by a settled the
4	Ш	name, city,	esearch organization opera and state:	ited in conjunction with	a nospital descri	ibed in section :	1/U(b)(1)(A)(III). E	nter the hospital's
5			ition operated for the bene (iv). (Complete Part II.)	fit of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170
6		A federal, s	tate, or local government o	or governmental unit de	scribed in sectio	on 170(b)(1)(<i>A</i>	l)(v).	
7			ition that normally received $\mathbf{0(b)(1)(A)(vi)}$. (Complete		s support from a	governmental u	ınit or from the gener	al public described in
8	✓	A communi	ty trust described in sectio	on 170(b)(1)(A)(vi).	(Complete Part I	I.)		
9			ral research organization or ant college of agriculture.					ege or university or a
10		from activit investment	ition that normally received ies related to its exempt fu income and unrelated busi see section 509(a)(2). (0	inctions—subject to cer iness taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its s	ipport from gross
11			ition organized and operate		r public safety. S	See section 509	(a)(4).	
12		more public	ition organized and operate ly supported organizations through 12d that describe	described in section 5	09(a)(1) or se	ction 509(a)(2). See section 509(a	
a		organizatio	upporting organization open n(s) the power to regularly Part IV, Sections A and I	appoint or elect a majo				
b		Type II. A manageme	supporting organization sunt of the supporting organical organical plete Part IV, Sections A	pervised or controlled i zation vested in the sar				
С		Type III f	unctionally integrated. A programization(s) (see instruc	supporting organizatio				ited with, its
d		Type III n	on-functionally integrat integrated. The organizati). You must complete Pa	ed. A supporting organion generally must satis	ization operated fy a distribution	in connection wi	th its supported orgai	
e		Check this	pox if the organization rece or Type III non-functionall	eived a written determir	nation from the I		pe I, Type II, Type II	I functionally
f	Enter		of supported organizations		-			
g	Provi	de the follow	ing information about the s	supported organization(s).			
organization organization in your governing document? I monetary support				(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)			
					Yes	No		
			I					
Tota			tion Act Notice, see the		Cat. No. 11285		 Schedule A (Form 9	<u> </u>

Р	Support Schedule for						
	(Complete only if you c						er Part II. If
	the organization fails to	qualify under	the tests listed	oelow, please co	omplete Part II.)	
Se	ection A. Public Support						
	Calendar year	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	(or fiscal year beginning in) ► Gifts, grants, contributions, and		` '	``		` '	
1	membership fees received. (Do not						
	include any "unusual grants.") .						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, 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 business						
	under section 513						
4	Tax revenues levied for the						
	organization'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						
/a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
h	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.						
	Add lines 7a and 7b.						
8	Public support. (Subtract line 7c						
	from line 6.)						
36	ection B. Total Support		1	1	1	T	Τ
	Calendar year	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	(or fiscal year beginning in) ► Amounts from line 6						
	Gross income from interest,						
L0a	dividends, payments received on						
	securities loans, rents, royalties and						
	income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975.						
_	Add lines 10a and 10b.						
с 11	Net income from unrelated business						
11	activities not included in line 10b,						
	whether or not the business is						
	regularly carried on.						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.).						
14	First 5 years. If the Form 990 is for the	ne organization's	first, second, third	l, fourth, or fifth t	ax vear as a secti	on 501(c)(3) orga	nization.
	check this box and stop here	-			•	() ()	· —
-				<u> </u>			· · · · • · · ·
	ection C. Computation of Public S Public support percentage for 2020 (lin			column (f))		1 4 = 1	
15						15	
16	Public support percentage from 2019 S					16	
Se	ection D. Computation of Invest						
17	Investment income percentage for 202	-		-		17	
18	Investment income percentage from 2	019 Schedule A,	Part III, line 17 .			18	<u> </u>
	331/3% support tests—2020. If the	organization did r	not check the box	on line 14, and lir	ne 15 is more than	33 1/3%, and lin	e 17 is not
	more than 33 1/3%, check this box and						
	33 1/3% support tests—2019. If the						
U	not more than 33 1/3%, check this box	-			·		
20	· · · · · ·	-	-				
20	Private foundation. If the organization	on did not check a	a box on line 14, 1	.9a, or 19b, check	this box and see	instructions	. ▶ ⊔

Page 4

5a

5b 5c

6

7

8

9a

9b

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020

amendment to the organizing document).

complete Part I of Schedule L (Form 990 or 990-EZ).

the organization had excess business holdings).

organization had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

provide detail in Part VI.

answer line 10b below.

6

7

8

10a

box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you checked box 12d, of Part I, complete Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

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.	1		
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).			
	III section 309(a)(1) or (2).	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.	3a	ı	
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.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section $170(c)(2)(B)$ purposes?			

	m section ses (a)(1) or (2).	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.	3a		
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.	3b		
С	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.	3с		
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.			

	the public support tests under section 509(a)(2)? If res, describe in Part VI when and now the organization made the						
	determination.	3b					
С	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.						
С	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.	4c					
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						

С	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.						
С	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						

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

Substitutions only. Was the substitution the result of an event beyond the organization's control?

organization's supported organizations? If "Yes," provide detail in Part VI.

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

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

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

Was the organization controlled directly or indirectly at any time during the tax year by one or more disgualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Pā	rt IV Supporting Organizations (continued)				
			Yes	No	
11	Has the organization accepted a gift or contribution from any of the following persons?				
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?	11a			
h	A family member of a person described in 11a above?	11a			
	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to 11a, 11b, or 11c, provide detail in Part	11c			
	VI.				
5	ection B. Type I Supporting Organizations		Yes	No	
1	Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's 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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	163	140	
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that				
	operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2			
_	ection C. Type II Supporting Organizations				
	ection c. Type 11 Supporting Organizations		Yes	No	
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of				
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1			
S	ection D. All Type III Supporting Organizations				
			Yes	No	
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing	1			
_	documents in effect on the date of notification, to the extent not previously provided?				
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).				
3	By reason of the relationship described in line 2 above, did the organization's supported organizations have a significant	2			
,	voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3			
S	ection 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 instruct	ions):			
	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.				
	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No	
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a			
	b Did the activities described in line 2a constitute activities that, but for the organization's involvement, one or more of the				
	organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b			
3	Parent of Supported Organizations. Answer lines 3a and 3b below.				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI .	3a			
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI.</i> the role played by the organization in this regard.	3b			

Schedule A (Form 990 or 990-EZ) 2020 Page 6 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional) Net short-term capital gain 1 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 3 Add lines 1 through 3 4 4 5 Depreciation and depletion 5 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) 7 Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year): a Average monthly value of securities 1a **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) **1**d e Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt use assets 2 3 Subtract line 2 from line 1d 3 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see 4 instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by 0.035 6 6 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) 8 Current Year Section C - Distributable Amount Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 4 4 5 5 Income tax imposed in prior year

6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions) Schedule A (Form 990 or 990-F7) 2020

1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions	6	
7	Total annual distributions. Add lines 1 through 6.	7	
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions	8	
9	Distributable amount for 2020 from Section C, line 6	9	

7 Total annual distributions. Add lines 1 through 6.	7			
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions				
9 Distributable amount for 2020 from Section C, line 6			9	
10 Line 8 amount divided by Line 9 amount				
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2020	ons	(iii) Distributable Amount for 2020
4 Distributable assessment from 2020 forms Continue Colline C				

7 Total annual distributions. Add lines 1 thro	7	7			
Distributions to attentive supported organizate details in Part VI). See instructions	8				
9 Distributable amount for 2020 from Section (9				
10 Line 8 amount divided by Line 9 amount	10 Line 8 amount divided by Line 9 amount				
Section E - Distribution Allocatio (see instructions)	ns (i) Excess Distributions	(ii) Underdistributions Pre-2020		(iii) Distributable Amount for 2020	
1 Distributable amount for 2020 from Section C	, line 6				
2 Underdistributions, if any, for years prior to 2 (reasonable cause required explain in Part See instructions.					
3 Excess distributions carryover, if any, to 2020):				
a From 2015					
b From 2016					

9 Distributable amount for 2020 from Section C, line 6					
10 Line 8 amount divided by Line 9 amount	10 Line 8 amount divided by Line 9 amount				
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2020	ns	(iii) Distributable Amount for 2020	
1 Distributable amount for 2020 from Section C, line 6					
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required explain in Part VI). See instructions.					
3 Excess distributions carryover, if any, to 2020:					
a From 2015					
b From 2016					
c From 2017					
d From 2018			•		
e From 2019					

f Total of lines 3a through e

instructions)

3j and 4c. 8 Breakdown of line 7:

d Excess from 2019. e Excess from 2020.

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

g Applied to underdistributions of prior years h Applied to 2020 distributable amount i Carryover from 2015 not applied (see

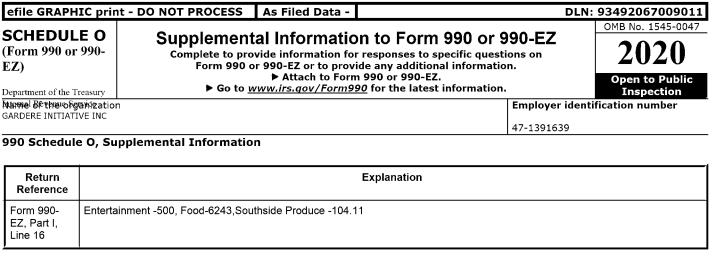
4 Distributions for 2020 from Section D, line 7:

j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.

\$		
a Applied to underdistributions of prior years		
b Applied to 2020 distributable amount		
c Remainder. Subtract lines 4a and 4b from line 4.		
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.		
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, <i>explain in Part VI</i> . See instructions.		
7 Excess distributions carryover to 2021. Add lines		

Schedule A (Form 990 or 990-EZ) (2020)

Schedule A (chedule A (Form 990 or 990-EZ) 2020 Pag		
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).		
	Facts And Circumstances Test		



990 Schedule O, Supplemental Information

Doturn

Reference	Explanation
	Beginning Year balance = 16157, plus Total Income 69,485.72, Grand total = 85,642.72, subt ract Total Expense = 67,979.57= 17,663.15 - Ending of Year = 19,137.95 = (1,474.80)

Evalanation