~
JUL
5
<b>4</b> >
$\infty$
6
-
2
M
N
4
_

810665

# CHANGE OF ACCOUNTING PERIOD

i	<b>5</b>	. 9 <u>(</u>	30	Return of Or	ganization E	xempt Fr	om Ir	icome 1	Гах	OMB No. 15	45-0047
	ron			Under section 501(c), 527, a	/ 4947(a)[1) of the into	- ernal Revanue (	Code (ex	cept private	foundations	202	20
,	Dan	arten-11 e	f the Tressury		el security numbers					Open to	
			ive Service		.gov/Form990 for inc					Inspec	
7	Ä	For the	2020 calen	der year, or tax year beginnir			and endir		09/30	, 20 20	
f	8	Check If	applicable:	C Name of organization VALLE	Y OF THE SUN SCHO	OOL PROPERT	IES TWO		_	yer identification	ı muzete
[	՝	Address	change	Doing business as	······································					86-0807244	/-
إ	=	Name ct	- 1	Number and street (or P.O. box	: If mail ia not desvered tr	(seembba seents c	] [	loom/eulte	E Telepho	one number	
[	=	initial ret	**	1142 W Halcher Road			L			602-371-0806	
Ļ	=		rn/terminated	City or town, state or province,	country, and ZIP or (ore)	gn postal code					
ľ	=	Amende	a retum on pending	Phoenix, AZ, 85021	m Clady O			1	@ Gross r	<del></del>	21,0
/	ت	whhieran	on panoing	F Name and address of principal of 1142 West Hatcher, Phoenix	_	eville	~			subordinates?	
/ ī	ì	Tax-exe	npt statue:	✓ 501(c)(3)	) ◀ (Insert no.)	4947(u)(1) or	1 527	_	all auboroina(e) altach a list. Sei	s included? 🔲 Y	OF
/ ;			: ► valleyiii		7 (-1.0-1.0-1)	10 17 tag(17 til	ارس		up exemption n		
K					iston Other >	\ LY	rat of form		···-	of legal domicile.	AZ
	Pa	art I	Summai	y .					,		
		1	Briefly des	cribe the organization's mis	ston or mast signifi	cant activities	: Provid	e housing (	or developm	entally disable	d adu
	8		***********	***************************************							
	草			***************************************							
'n	Governance	2	Check this	box - If the organization	n discontinued Its o	perations or o	disposed	of more th	nan 25% of i	ts net assets.	
SCANNE	8			voting members of the gov					\ 3		
≥'	Activities &			independent voting member				) WO:	. 4		
ź١	ĕ∣	5	Total numb	er of Individuals employed	in calendar year 20	)20 (Part V, lin	e 2a) a	. j.u	. 5		
回;	[달			er of volunteers (estimate i			· , y\	9 · · ·	, 6		
Ω.	٦			ated business revenue from			· 18		· 70		
<u></u>	$\dashv$	þ	MAI CIMPIAL	ed business taxable incom	9 irom rom 990-1,	Part I, line	<del>10:</del>		. 7b		
8	- 1	8	Contributio	ns and grants (Part VIII, Ilne	_ 1 <u>L</u> \	c	( <b>U</b>	Prior		Current Y	
_	2			ervice revenue (Part VIII, Iline Prvice revenue (Part VIII, Iline		(8)			0		1,9
သ	Revenue			income (Part VIII, column (			٠.		72,409		19,8
8 2022	<u>~</u>			nue (Part VIII, column (A), Ilr			• •		24		
ನ	- 1			ue—add lines 8 through 11					72,433		21,0
~-	寸			similar amounts paid (Part					72,450		21,0
				d to or for members (Part					al a		
9	se I			ner compensation, employee					<u>-</u> i		
7	Expenses			d fundraising fees (Part IX,					0		
ì	ĕΙ			alsing expenses (Part IX, co			0	, , , ,	أز ريقال کو	S. S. E.	43.50
u	<b>"</b>	17	Other expe	nses (Part IX, column (A), Ili	nes 11a-11d, 11 <b>i-</b> 2	40)			111,866		34,4
				ses. Add lines 13-17 (mus					111,866		34,4
	48	19	Revenue les	se expenses. Subtract line	16 from line 12 .				-39,433		-13,3
_	Ž.							Geginning of	Current Year	End of Ye	er
		20		s (Part X, line 16)				-	563.059		564,5
8	781	A4 :		les (Part X, line 26) 🔒 🔒					134,900		149,7
Assets	2				" 64 1 1 66				428,159		414,7
Net Assets	<b>2</b>	22	eteess tel	or fund balances. Subtrace	line 21 from line 20	<u> </u>	• •		720,100		
Net Assets		22   11	Net assets of Signatur	or fund balances. Subtrace					` `		
Net Assets		22   11	Net assets of Signatur	or fund balances. Subtrace			s and state	emente, and to	` `	y knowledge and	belief,
Net Assets		22   11	Net assets of Signatur	or fund balances. Subtrace			s and state	emente, and to	` `	y knowledge and	belief,
Het Assets	Jnd-	22 or penalt correct,	Signatur Signatur ee of perjury and comptele	or fund balances. Subtrace  Block  deligrathal I have exercised the perfection of pressure (offer the			s and state		O line these of my	y knowledge and	s belief,
S Ret Assets	Jnd-	22 or penalt correct,	Signatures of perjundand complete	or fund balances. Subtrace e Block deligrathal I have examined this perspection of practice to have the			s and etate		` `	y knowledge and	s ballef,
S Ret Assets	Jnd-	22 or penalt correct,	Signatures of perjundand complete.  Signatures of perjundand complete.  Signature	or fund balances. Subtrace  Block  deligrathal I have exercised the perfection of pressure (offer the			s and etat		O line these of my	y knowledge and	s belief,
H S H	Par Jude	22 or penalt correct,	Signatures of perjundand comptete.  Signatures of perjundand comptete.  Signature  Cletus Type or	or fund balances. Subtrace e Block delire hall have examined this persuation of pressure joiner tha contributer Thiebeau, Board Member	return, including accom n officer) is based on all				o the best of m wiedge	12021	s belief,
TO THE PROPERTY OF THE PROPERT	201 Under Ign	22 or penalti correct,	Signatur ee of perjury and compute Signatur Cletus Type or	or fund balances. Subtrace e Block deline hall have examined the personal process to proceed the process of process to proceed the print name and title					O line these of my	/202/	s belief,
	Pal Under Ilgrand	er penalti correct,	Signatur ee of perjury and compute Signatur Cletus Type or	or fund balances. Subtrace  a Block  decirculati have evandred that perfection of pressure joiner that  a distilicer  Thiebeau, Board Member print name and title preparer's name	return, including accom n officer) is based on all			ate	Date  Chack  self-empk	/202/	s belief,
	Pal Under Ilgrand	22 or penalti correct,	Signatur ee of perjury and compute Signatur Cletus Type or	or fund balances. Subtrace  Block  decirculation of pressure joiner that prepared on of pressure joiner that  of different the pressure print name and title  preparer's name	return, including accom n officer) is based on all			ate	Date Check	/202/	s belief,

Form 9	0 (2020) Page
Part	Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
7	Briefly describe the organization's mission:
	Provide housing for developmentally disabled adults
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
_	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
_	•
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured to expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other the total expenses, and revenue, if any, for each program service reported.
48	(Code: ) (Expenses \$ 30,521 Including grants of \$ 0 ) (Revenue \$ 27,104 )
	Provide housing for developmentally disabled adults
	***************************************
	^^^^^
	***************************************
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	***************************************
4b	(Code. ) (Expenses \$ including grants of \$ ) (Revenue \$ )
	······································
	\$77.51.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.
	***************************************
	***************************************
46	Code: ) (Expenses \$ Including grants of \$ ) (Revenue \$ )
	A TOTAL PROPERTY OF THE PROPER
	***************************************
	Other program services (Describe on Schedule O.)
	Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)
40	otal program service expenses > 30.521

Form **990** (2020)

ADRO

Form 990 (2020)

Page 3

l'ai	Checking of Hequired Schedules			
		,	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	/	
2	is the organization required to complete Schedule B, Schedule of Contributors See Instructions?	2		~
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yas," complete Schedule C, Part I	3		,
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		~
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		~
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	8		v
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		,
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		,
8	Old the organization report an amount in Part X, line 21, for eacrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		,
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V.	10		~
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X as applicable.	17.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	•	~
C	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		~
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 Part X, line 16? If "Yes." complete Schedule D, Part IX	11d	~	
8	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	110	~	
1	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	111		~
12a		12a		
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	<b>Y</b>	
13 14a	Is the organization a school described in section 170(b)(1)(A)(li)? If "Yes," complete Schedule E  Did the organization maintain an office, employees, or agents outside of the United States?	13		7
b		14a		
_	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		•
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		~
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		<b>y</b>
18	Did the organization report more than \$15,000 total of fundralsing event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		•
0	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a7  If "Yes," complete Schedule G, Part III	19		<u> </u>
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	-	~
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20ь		_
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		~
		F	000	(2020)

•

	90 (2020)		1	- <sub>Rgo</sub> 4
Part	Checklist of Required Schedules (continued)			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes;" complete Schedule I, Parts I and III	22	Yes	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schodule J.	23		·
24a	\$100,000 as of the last day of the year, that was leaved after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		_
c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c	-	
d		24d		$\vdash$
268	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		v
b	le the organization aware that it engaged in an excess benefit transaction with a disquelified 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 Schedule L, Part I	25b	:	<b>V</b>
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		~
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," camplete Schedule L, Part III	27		~
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV Instructions, for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	26a		v
Ь	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		~
¢	A 35% controlled entity of one or more Individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	<b>28</b> ¢		~
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28		~
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		,
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		~
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-37 if "Yes," complete Schedule R, Part I	33		v
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	V	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		v
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R. Part VI	37		~
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note: All Form 990 filers are required to complete Schedule O.	38	V	
Part	Statements Regarding Other IRS Filings and Tax Compliance Check If Schedule O contains a response or note to any line in this Part V	<u> </u>		
<b>4</b> -	Fate-the control of the same o		Yes	No
1a b c	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		13 - 19 0 6 - 19 1 1 - 1	
	reportable gaming (gambling) winnings to prize winners?	1c	. 990	(2020)

Form 9	90 (2020)		F	Page 5
Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
<b>2</b> a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	, 4,7	A . M	10.65
<b>.</b>	Statements, filed for the calendar year ending with or within the year covered by this return 28 0	4	: 444	177
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	<b>25</b>	1,77,74,1	17 E & 17 T
_ 3a -	- Old the organization have unrelated business gross income of \$1,000 or more during the year?	3-m	· · · · · · · ·	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		<del></del>
4a	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)?	48		V
b	If "Yes," enter the name of the foreign country ▶		,	WAY:
_	See Instructions for filing requirements for FInCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	32.7		3 1
58	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~
D	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b		~
6a		5c		
Va	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		v
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6ъ		
7	Organizations that may receive deductible contributions under section 170(c).		'	
8	Did the organization receive a payment in excess of \$76 made partly as a contribution and partly for goods	• •	'	1
	and services provided to the payor?	7a		~
Ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		—
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		·
d	If "Yes," Indicate the number of Forms 8282 filed during the year	76		<b>-</b>
•	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		·
1	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		~
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		~
h	If the organization received a contribution of cars, boats, sirplanes, or other vehicles, did the organization file a Form 1098-C?	7h		~
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		, ,
9	Sponsoring organizations maintaining donor advised funds.		•	
8	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
ь	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<b>8</b> p		
10	Section 601(c)(7) organizations. Enter:	. 1	. :	,
8	Initiation fees and capital contributions included on Part VIII, line 12		1	ļ. '
ь 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b Section 801(c)(12) organizations. Enter:	,		ľ ·
'' <u>a</u>	Gross income from members or shareholders		:	
ъ	Gross income from other sources (Do not net amounts due or paid to other sources	l I	٠,	7
_	against amounts due or received from them.)	3.	* ; ; ;	
128	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in Ileu of Form 1041?	12a		L
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	13.39	: :	
13	Section 501(c)(29) qualified nonprofit health insurance lesuers.	, ,,,	<u>. '. ', '</u>	· > .
a	Is the organization licensed to issue qualified health plans in more than one state?	13a	,,	بيسي
	Note: See the Instructions for additional Information the organization must report on Schedule O.	100		
Ь	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	160		18.4
C	the organization is licensed to issue qualified health plans	14.7.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	148	• •	1716 31
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b		
	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		~
	If "Yes," see instructions and file Form 4720, Schedule N.	1.50	<i>Y</i> .	(54.7)
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		<b>V</b>
	If "Yes," complete Farm 4720, Schedule O.		<u>' · · · `</u>	ુ છે.

Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below.	and f	or a	Paga 6 "No"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.	See ins	struc	tions.
9001	Check if Schedule O contains a response or note to any line in this Part VI			· [2]
aeci	ion A. Governing Body and wanagement	1	Vaa	
1a	Enter the number of voting members of the governing body at the end of the tax year   1a   5	19.52 F	Yes	No
	If there are material differences in voting rights among members of the governing body, or		يز أ <sub>و</sub> ار	17
	If the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5	.); ,
þ	Enter the number of voting members included on line 1a, above, who are independent . 1b 2		,	P
2	Did any officer, director, trustee, or key employee have a femily relationship or a business relationship with any other officer, director, trustee, or key employee?	2	3 - 1	· •
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	1	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		~
5 6	Did the organization become aware during the year of a significant diversion of the organization's essets? .  Did the organization have members or stockholders?	5 6		7
7 <b>a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	78		,
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		,
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8a	<b>/</b>	L
ь	Each committee with authority to act on behalf of the governing body?	θъ		~
9	Is there any officer, director, truslee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		_
<u> 5001</u>	on B. Policies (This Section B requests information about policies not required by the Internal Reven			
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yee	Na
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11s	~	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		_	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		1
Ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	12c		
13	Did the organization have a written whistleblower policy?	13		~
14 15	Did the organization have a written document retention and destruction policy?	14	, ;	
13 a	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official			, .
ь	Other officers or key employees of the organization	15e 15b		V
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	, 1		- <del>-</del> -
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	10a		٠
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	, , ,	3 (4	., .,
jecti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► AZ			<i>-</i>
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-1 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	(Sect	ion 5	i01(c)
	Own website	_		
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict o and financial statements available to the public during the tax year.			olicy,
20	State the name, address, and telephone number of the person who possesses the organization's books and rec ValleyLife, (602)371-0806	cords P	•	
	VAIRVLUE, IMIZISTALIAND			

Form 990 (2020	D)
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors
	Check if Schedule O contains a response or note to any line in this Part VII
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
1a Complet	te this table for all persons required to be listed. Report compensation for the calendar year ending with or within the teat 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 instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) 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 instructions for the order in which to list the persons above.

		1		*	C)		กรล			
(A) Name and title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					tee)	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other componsation
	fist any fist any releted organizations below dotted line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	Irom the organization and related organizations
Cletus Thiebeau	2.00						Ī .			<del></del>
Board Member	38.00	1						0	0	C
Linda Miller	2.00							-		
Board Member	38 00	~	L		L		<u></u>	0	. 0	
Jim Anderson	5.00									
Director	35 00	~	L			<u> </u>	L	Ó	. 0	
Joel McCaba	1.00									
Director	0.00	~	L				L	0	0	C
Cindy Quenneville	1.00		}					-		,
President	0.00			<b>\</b>		L		0	0	
	************									
	••••••									
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,										
					$\neg$					

Form 990 (2020)

(A) Name and title	Ave	(B) Average hours per week		Average hours		Average hours		Average hours		Average hours per week		Average hours		Average hours		(C) Position (do not check more than box, unless person is bot officer and a director/ins				eri 86)	(D) Reporteble compensation from the	(E) Reportable compensation from related	(F) Estimated amous of other compansation
	hau. organi organi	any rs for stad stations low id line)	Individual trustae or director	Institutonal trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1098-MISC)	organizationa (W-2/1099-MISC)													
		**																					
***************************************				-	_			Г															
***************************************		•••••							<u> </u>														
***************************************		••••			П					· ·													
		·																					
·					H			T															
***************************************								$\vdash$															
***************************************		,,,,,,,																					
		*****			Н			<u> </u>			ļ												
•••••••••••••••••••••••••••••••••••••••		•••••							•														
b Subtotal	ts to Port VII. 6	, ,	 n A	•	•		•	<u> </u>	0														
d Total (add lines 1b and 1c). Total number of Individuals (In					ilet	od :	ohove	<u> </u>	0	0 than \$100 000													
reportable compensation from	the organization	1 -			1100				0		Yea												
Did the organization list any employee on line 1a? If "Yes,"	former officer	, dire	clor, for su	tru:	stee indi	ə, k İvidi	iey ei	mpi	oyes, or highes	at compensate													
For any individual listed on lin- organization and related organization and related organization.																							
Did any person listed on line 1 for services randered to the or										tion or individue	រ <sup>គឺស្ត</sup> ្រី (ក្រសួត្រី <b>5</b>												
ction B. Independent Contrac Complete this table for your		ากตกส	naate	ed I	nde	ner	ndent	CO	ntractors that r	received more	then \$100,000												
compensation from the organiz	ation. Report co								ar ending with or		nization's tax ye												
Name and	(A) business eddr <del>oss</del>			_				_	(B) Description of sen	rices .	(C) Compensation												
						_					-												

Form 880 (2020) Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII . (C) Unrelated Revenue excluded from lax under secilons 812-514 Federated campaigns Grants and Other Similar Amounts Membership dues . 16 Fundralsing events . 1c Contributions, Gifts, Related organizations . 1d Government grants (contributions) 10 All other contributions, gifts, grants, and similar amounts not included above 1f Noncash contributions included in fines 1a-1f. . . . . Total. Add lines 1a-1f 1.627 Business Code Program Service Tenant Rental Income 624120 8,347 624120 Government rent subsidies 11,221 11,221 0 All other program service revenue Total. Add lines 23-2f 19,568 investment income (including dividends, interest, and other similar amounts) . . . . . . . . . . . . . . 0 Income from investment of tex-exempt bond proceeds 0 Royaltles 0 (i) Roel (ii) Personal Gross rents . 6a Less, rental expenses θЬ Rental Income or (toss) | 6c Net rental income or (loss (i) Securities (ii) Other 7. Gross amount from sales of assets other than Inventory 7a Other Revenue Less: cost or other basis and sales expenses . 7b 7c Gain or (loss) . . Net gain or (loss) Gross income from fundralsing events (not including \$ of contributions reported on line 1c). See Part IV, line 18 Đ۵ Less: direct expenses . . . . 86 Net income or (loss) from fundralsing events C Gross income from gaming activities. See Part IV, line 19 Less: direct expenses . . . . Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances 10a Less: cost of goods sold . 10b Net income or (loss) from sales of inventory Business Code Miscellaneous Revenue All other revenue Total. Add lines 11a-11d 12 Total revenue. See instructions 21,097 19,570

	90 (2020)				Page 10
	Statement of Functional Expenses				· · · · · · · · · · · · · · · · · · ·
Section	on 501(c)(3) and 501(c)(4) organizations must comp	plete all columns. All	other organizations	must complete colu	ımn (A).
	Check if Schedule O contains a respons	e or note to any line	In this Part IX .		
	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(U) Program service expenses	(C) Manegement end general expenses	(D) Fundralsing expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22			INSTRUMENTAL STATE OF STRUCTS	
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 6	Benefits paid to or for members  Compensation of current officers, directors, trustees, and key employees				Property Control
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes		·		
11	Fees for services (nonemployees):		<del></del>		
a	Management	2,400		2,400	
Ь	Legal , , , , ,				· · · · · · · · · · · · · · · · · · ·
C	Accounting				·
d	Lobbying				
0	Professional fundraising services. See Part IV, line 17		si riu jat	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Ī	Investment management fees			1 1 1	
9	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				<u> </u>
12	Advertising and promotion		· · · · · · · · · · · · · · · · · · ·	-,,	<del></del>
13	Office expenses	1,253	-	1,253	
14	Information technology	1,293		1,294	
15	Royaltias	<del></del>	<del></del>	<del></del>	
16	Occupancy	22,910	22,910		
17	Travel	22,710	22,710		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings		<del></del>		
20	Interest				
21	Payments to affiliates ,				
22 23	Depreciation, depletion, and amortization .  Insurance	7,611	7,611	· · · · · · · · · · · · · · · · · · ·	
24	Other expenses, Itemize expenses not covered above (List miscellaneous expenses on line 24e If fine 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)	6. 10			
а	Other Miscellaneous Expense	319	0 0	319	0
b	Other Masconsingons Expense	314		317	
٥	44-4-4				
d	A(I _44				
	All other expenses			·	
25	Total functional expenses. Add lines 1 through 24e	34,493	30,521	3,972	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundralising solicitation. Check here  if following SOP 98-2 (ASC 958-720)				

Form 990 (2020) Page 11 Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) End of year Beginning of year Cash-non-Interest-bearing 15,472 21,871 Savings and temporary cash investments . 2 3 Pledges and grants receivable, not . . . 3 Accounts receivable, net 4 4 2,478 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . . Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B). ß 7 8 Prepaid expenses and deferred charges . . 9 9 2,488 1,556 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D . . . 10a 922,009 Less; accumulated depreciation . . . . . 10b 10c 435,391 11 Investmente—publicly traded securities . . . 11 12 Investments—other securities. See Part IV, line 11 12 13 Investments-program-related. See Part IV, line 11. 13 14 14 Other assets. See Part IV, line 11 . . . . . . 15 15 102,095 103,232 **1**G Total assets. Add lines 1 through 15 (must equal line 33) 563,058 16 564,528 17 Accounts payable and accrued expenses . . . 17 4,193 4,014 Grants payable . . . . . . , , . . 10 18 19 19 2,322 Tax-exempt bond liabilities . . . . 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D . . . 21 22 Liabalities Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . . つう Secured mortgages and notes payable to unrelated third parties . . . 23 83,649 23 83.849 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 46,058 59,581 Total liabilities. Add lines 17 through 25 . . 26 26 134,900 149,766 Assets or Fund Balances Organizations that follow FASB ASC 958, check here ▶ ☑ and complete lines 27, 29, 32, and 33. 27 Net assets without donor restrictions 27 420,158 414,762 28 Net assets with donor restrictions 28 0 0 Organizations that do not follow FASB ASC 958, check here > and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds . . . . 29 30 Pald-In or capital surplus, or land, building, or equipment fund . . . . . 30 31 Retained earnings, endowment, accumulated income, or other funds . . . 31 32 32 420,150 414,762 33 Total liabilities and net assets/fund balances . 33 563,058 564,528

Form **990** (2020)

Form 9	90 (2020)		Pe	ge <b>12</b>				
Pair	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)	<u> </u>		1,097				
2	Total expenses (must equal Part IX, column (A), line 25)			4,493				
3	Revenue less expenses. Subtract line 2 from line 1			3,396				
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4			8,158				
_5_	Net unrealized gains (losses) on investments			0				
8	Donated services and use of facilities			<del>-</del>				
7	Investment expenses	-		0				
8	Prior period adjustments			0				
9	Other changes in net assets or fund balances (explain on Schedule O)			0				
10	Net æssets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X. line							
Daw	32, column (B))		41	4,762				
Par	XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII	• •	- 1					
4	Assessables with advantable annual to E. a. non-Clouds Clauds Clauds		Yes	No				
•	1 Accounting method used to prepare the Form 990:   Gash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	20		,				
	If "Yes," check a box below to indicate whether the financial statements for the year were complied 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 sudited by an independent accountant?	2b	~					
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  Separate basis  Consolidated basis  Both consolidated and separate basis							
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	•					
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.							
3ø	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		,				
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.	3b						
		Forr	990	(2020)				

#### SCHEDULE A (Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

Complete If the organization is a section 501(c)(3) organization or a section 4947(e)(1) nonexampt charitable trust.

Attach to Form 990 or Form 990-EZ.

Adden to Form 880 EZ.

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

OMB No. 1545-0047
2020
Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

tion. Inspection
Employer identification number

VAL	LEY O	F THE SUN SCHOOL PROPE	RTIES TWO				86-08	107244		
_	rt I	Reason for Public Ch	arity Status. (A	Il organizations mu	st compl	ete this	part.) See instructi	ons.		
The	organi	zation le not a private foun	dation because it	ls: (For lines 1 throug	h 12, che	ck only o	ne box.)			
1	□A	church, convention of chur	rches, or associa	tion of churches desc	ribed in s	ection 17	70(b)(1)(A)(i).			
2	- 1 /- 1									
3										
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:									
5										
6		federal, state, or local gove	mment or gover	nmental unit describe	d in secti	on 170(b	)(1)(A){v}.			
7	□ Aı	n organization that normall escribed in section 170(b)(	y receives a sub	stantial part of its sur	port from	n a gove	mmental unit or from	n the general public		
8		community trust described	in section 170(t	)(1)(A)(vi). (Complete	Part II.)					
9	☐ Ar or ur	n agricultural research orga university or a non-land-g uversity:	nization describe rant college of ag	ed in <b>section 170(b)(1</b> ) riculture (see instructi	)( <b>A)(ix) o</b> p ons). Ent	er the nar	ne, city, and state o	f the college or		
10	✓ An organization that normally receives (1) more than 33½% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33½% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)									
11	☐ Ar	n organization organized ar	d operated exclu	sively to test for publi	ic safety.	See sect	ion 509(a)(4).			
12	☐ Ar	n organization organized an	d operated exclu	sively for the benefit of	of, to perf	orm the f	unctions of, or to ca	ny out the purposes		
	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g									
a										
b										
c		Type III functionally inte	grated. A suppor	rting organization ope	raled in c	onnectio	n with, and functions	ally integrated with,		
d			I <b>ntegrated.</b> A su egrated. The orga	upporting organization	operate st satisfy	d in conn a distribi	ection with ite suppo ution regulrement an	orted organization(s) id an attentiveness		
ė		Check this box if the orga functionally integrated, or	nization received	a written determinati	on from t	ne IRS th	at It is a Type I. Type	il, Type III		
ſ	Ente	r the number of supported				, , .				
g		ide the following information		ported organization(s)			, , , , ,			
	(I) Nam	e of Supported organization	(II) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	listed in you	rgardzetlon ir governing ment?	(V) Amount of monetary support (see instructions)	(vi) Amount of other support (see Instructions)		
,			1		Yes	No				
(A)										
(B)										
(C)					_					
(D)		<u> </u>	<del>                                     </del>							
			<b></b> .	1	I			1		

For Paparwork Reduction Act Notice, see the Instructions for Form 990 or 890-EZ.

(E) Total

Cat No 11285F

Schedule A (Form 990 or 990-€Z) 2020

Sched	ula A (Form 990 or 990-EZ) 2020			_			Page 2
Par	Complete only if you checked to Part III. If the organization fails to	he box on line	e 5, 7, or 8 of	Part I or if th	e organization	n failed to qu	alify under
Sect	lon A. Public Support	s quality article	or the tests in	sted below, p	HOUSE COMPIE	to rare ii.j	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) fotal
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4	<del></del>	- 4			·	
	lon B. Total Support	<u>'</u> .	<u> </u>	1	<u> </u>		l
	ndar year (or fiscal year beginning in) Amounts from line 4	(a) 2016	<b>(b)</b> 2017	(c) 201B	(d) 2019	(e) 2020	(f) Total
8	Gross income from Interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on		·		r		
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)				`		
11	Total support. Add lines 7 through 10	<u>/</u>					
12	Gross receipts from related activities, etc	. (see Instructio	ona) , ,			12	
13	First 5 years. If the Form 990 is for the organization, check this box and stop he						on 501(c)(3)
Secti	on C. Computation of Public Suppor			<del>:                                    </del>		····	
14	Public support percentage for 2020 (line 6	column (f), d	ivided by line	11. column (f)		14	%
15	Public support percentage from 2019 Sch		-	• • • • •		15	%
18a	331/3% support test—2020. If the organi	zation did not	check the box	on line 13, ar	nd line 14 ls 33	1/3% or more,	check this
	box and atop here. The organization qual						
Ь	331/s% support test—2019. If the organization this box and stop here. The organization	qualfiles as a j	publicly suppo	rted organizati	ion		· · · 🕨 🗀
17a	10%-facts-and-circumstances test – 20 10% or more, and if the organization means the organization means the organization.	eets the facts	and-circumsta	ances test, ch	eck this box a	nd stop here.	Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or/more, and if the organization in Part VI how the organization meets the organization	n meets the fa	cts-and-circur cumstances te	nstances test,	check this box	x and stop he	re. Explain
18	Private foundation. If the organization of instructions	did not check	a box on line	13, 16a, 16b	, 17a, or 17b,	check this bo	
		**		-			0 or 990-EZ) 2020

### 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 falled to qualify under Part II. If the organization falls to qualify under the tests listed below, please complete Part II.)

Sect	in A. Public Support	under the te	sts listed Deid	ow, piesse co	mpiete Part i	<u>!.)                                    </u>	
	ider year (or fiscal year baginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees	14/10/10	(5) 2017	(0) 2010	(4) 2010	10/ 2020	(I) TOTAL
	received. (Do not include any "unusual grants,")	27,162	<u> </u>	0	<del>-</del>	_	28,689
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the			<u>_</u>			
3	organization's tex-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513	78,984	79,192	75,038	72,409	19,568	325,991
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 7ø	Total. Add lines 1 through 5.  Amounts included on lines 1, 2, and 3 received from disqualified persons	106,146	79,192	75,838	72,409	21,096	354,680
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				ť		
C	Add lines 7a and 7b	ō	0	0	0	D	0
8	Public support. (Subtract line 7c from	1	, , , , , , , , , , , , , , , , , , , ,		i .		•
	Ilne 6.)	, ;		, ,	**	, ""	354,680
	on B. Total Support		<del></del>				
	dar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	<b>(d)</b> 2019	( <b>•</b> ) 2020	(f) Total
9 10a	Amounts from line 6	106,146 28	79,192 29	75,838 30	72,409	21,095	354,680
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	20		30	24	2	113
c	Add lines 10a and 10b	28	29	30	24	2	113
11	Net income from unrelated business 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.)	106,174	79,221	75,868	72,433	21,097	354,793
14	First 6 years. If the Form 990 is for the	organization's					n 501(c)(3)
	organization, check this box and stop her				<u> </u>	<u></u>	. , ▶ □
	on C. Computation of Public Suppor						
15	Public support percentage for 2020 (line 6					15	99.97 %
18	Public support percentage from 2019 Sch			<i>.</i> .	<u> </u>	18	99 97 %
	on D. Computation of Investment Inc					-,	
17	Investment Income percentage for 2020 (I					17	0.03 %
10	Investment income percentage from 2019					16	0 03 %
19a	3316% support tests - 2020. If the organi						
b	17 is not more than 3312%, check this box a 3312% support tests—2019. If the organizine 18 is not more than 3312%, check this b	ation did not o	neck a box on l	line 14 or line 1	9a, and line 16	is more than 3	 and
20	Private foundation. If the organization di	-	•	•			_
	The organization of	a not onlook a	VII III IO 17,	100,01100,0	TICOR THE DOX		

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

Page 4

Part IV	Sup	porti	ng (	Drgan	izations

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

Sect	ion 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 <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		18.34
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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2	(31%) -(1	10
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	7.3	,
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? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c	,	
48	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.	48	,	ľ
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		,
Ċ	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		
58	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 <b>Part VI</b> , 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).	5a	, , ,	
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?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	Вc	<b>-</b>	
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 filling organization's supported organizations? If "Yes," provide detail in Part VI.	8		
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 or 990-EZ).	÷ 7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
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.	90		4.
þ	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	θЬ	· ·	
C	Did a disqualified person (as defined in 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 <b>Part VI.</b>	8735 9c	1,000	
10a		10a	1 : 1	133, 3,-
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.)	10b	,	

Schedule A (Form 990 or 990-EZ) 2020

	V Supporting Organizations (continued)			Pago C
_			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		ام الرادة ا	1
a	The second of th		14.7	
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described in line 11a above?	11b		ļ
—с	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a,-11b, or 11c, provide	. 3	<b>*</b> -,	, ,
<del></del>	detail in Part VI.	11c		
<u>Sect</u>	ion B, Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or	37.2	19.4	300
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			7
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)		, k a	7,
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported		ઝ, ફો	
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			30,
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		<u> </u>
2	Did the organization operate for the benefit of any supported organization other than the supported	11	14.	
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part		,k. ;	, ' ·
	VI how providing such benefit carned out the purposes of the supported organization(s) that operated,		, '	;
	supervised, or controlled the supporting organization.	2		
Sect	ion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		۱, ۱	1
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			١.
	or management of the supporting organization was vested in the same persons that controlled or managed		. :	
	the supported organization(s).	1	L	1
Sect	lon 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			7
	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 filled as of the date of notification, and (iii) copies of the		i '	
	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	,	,	l '
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's		. :	
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's		'	l
	supported organizations played in this regard.	3		
Secti	on 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	nstru	ction	B),
8	The organization satisfied the Activities Test. Complete line 2 below.			•
þ	☐ 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	(888 in	struc	tions
2	Activities Test. Answer lines 2a and 2b below.		Yes	_
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		l: : /	<b>.</b> .
	those supported organizations and explain how these activities directly furthered their exempt purposes,		1	ķ
	how the organization was responsive to those supported organizations, and how the organization determined	· 70°	157	( ·
	that these activities constituted substantially all of its activities.	2a	ľ	Ì
	Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement,	2 1341	1143.4	> **.
h	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			18.
Ь				
Ь		1 5 3	13.4	
ь	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in	44.		), 
	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		<u> </u>
3	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  Parent of Supported Organizations. Answer lines 3e and 3b below.	44.		
	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.  Parent of Supported Organizations. Answer lines 3e and 3b below.  Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	<b>2</b> b		7.4.7. 7.4.7.
3	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  Parent of Supported Organizations. Answer lines 3e and 3b below.	2b		24 h

Section  1 N 2 F 3 C 4 A 5 E 6 F 7 C 8 A Section  1 A	Type III Non-Functionally Integrated 509(a)(3) Supporting Ord Check here if the organization satisfied the Integral Part Test as a qualifying Instructions. All other Type III non-functionally integrated supporting organization. A—Adjusted Nat Income  Not short-term capital gain Recoveries of prior-year distributions Other gross income (see instructions) Add lines 1 through 3. Depreciation and depiction 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) Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	a tri	ust on Nov. 20, 1970 (expla tions must complete Section (A) Prior Year	dn in Part VI). See ons A through E. (B) Current Yea (optional)
1 N 2 F 3 C 4 A 5 E 6 F 9 H 7 C 8 A Section 1 A Ir	Net short-term capital gain Recoveries of prior-year distributions Other gross income (see instructions) Add lines 1 through 3. Depreciation and depiction Pontion 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) Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	1 2 3 4 8	(A) Prior Year	(B) Current Year
2 F 3 C 4 A 5 E 5 E 6 F 9 h 7 C 8 A Section 1 A in a A	Recoveries of prior-year distributions Other gross income (see instructions) Add lines 1 through 3. Depreciation and depletion Pontion 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) Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	2 3 4 5		
3 ( 4 A A A A A A A A A A A A A A A A A A	Other gross income (see instructions)  Add lines 1 through 3.  Depreciation and depletion  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)  Other expenses (see instructions)  Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	3 4 8		
4 A A Section 1 A A A	Add lines 1 through 3.  Depreciation and depletion  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)  Other expenses (see instructions)  Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	<del></del>	
5 E 6 F 9 h 7 C 8 A Section 1 A	Depreciation and depletion  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)  Other expenses (see instructions)  Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
6 F g h 7 C 8 A Section 1 A	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)  Other expenses (see instructions)  Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		-
7 C 8 A Section 1 A Ir	gross income or for management, conservation, or maintenance of property held for production of income (see instructions)  Other expenses (see instructions)  Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	_		
8 A Section 1 A Ir	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	7	1	
Section 1 A				
1 A		8		<del></del>
lr a A	n B—Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
hΛ	Average monthly value of securities	18		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Average monthly cash balances	16		<del>                                     </del>
	Fair market value of other non-exempt-use assets	10		1
	Total (add lines 1a, 1b, and 1c)	10		
D • (e	Discount claimed for blockage or other factors explain in detail in Part VI):	10	The state of the s	
2 A	Acquisition indebtedness applicable to non-exempt-use assets	2		<del>                                     </del>
3 8	Subtract line 2 from line 1d,	3	· · · · · · · · · · · · · · · · · · ·	
4 C	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	7	<del></del> -
5 N	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		<del> </del>
	Multiply line 5 by 0.035.	8	<del></del> -	<del> </del>
7 R	Recoveries of prior-year distributions	7		<del> </del>
	Minimum Asset Amount (add line 7 to line 6)	8		<del> </del>
	n C-Distributable Amount			Current Year
1 A	djusted net income for prior year (from Section A, line 8, column A)	1	The second secon	<del> </del>
	nter 0.85 of line 1.	2		<del> </del>
3 M	Ainimum asset amount for prior year (from Section B, line B, column A)		Carlot Ca	<u> </u>
4 Er	nter greater of line 2 or line 3.	14	124 152 199 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>
	ncome tax imposed in prior year	5		,
	Pietributable Amount. Subtract line 5 from line 4, unless subject to	<del></del> -	LANCE WAS NO RESIDENCE OF WAS A SHOWN	<del>                                       </del>

Schedule A (Form 990 or 990-EZ) 2020

Sched	ula A (Form 990 or 990-EZ) 2020		,	(	Page 7
Par	Type III Non-Functionally Integrated 509(a)(	3) Supporting Organ	izations (continue	d)	
Sec.	tion D-Distributions	-,			Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		1	
2	Amounts paid to perform activity that directly furthers ex	empt purposes of supp	orted	<u>-</u>	
,	organizations, in excess of income from activity	, , , , , , , , , , , , , , , , , , , ,		2	
3_	Administrative expenses paid to accomplish exempt pur	poses of supported orga	mizations	3	<u></u>
4	Amounts paid to acquire exempt-use assets			4	
	Qualified set-aside amounts (prior IRS approval required	– provide details in Part	VI)	5	
0	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	ch the organization is rea	eponelive		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6	<del></del> -		9	· · · · · · · · · · · · · · · · · · ·
10	Line 8 amount divided by line 9 amount		<u></u> _	10	·
Sec	tion E-Distribution Allocations (see instructions)	(i) Excess Distributions	(li) Underdistribution Pre-2020	18	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6	STANDARD AND AND AND AND AND AND AND AND AND AN	967 CH 1 1 1 1 1 1 1 1 1 1	ķ	ī
2	Underdistributions, if any, for years prior to 2020		,		<b>"这个人,我们是一个人,</b>
	(reasonable cause required-explain in Part VI). See				
	instructions.				
3	Excess distributions carryover, if any, to 2020		36 13 S		であるないのである。
<u>a</u>	From 2015	A STATE OF THE STA			
<u>b</u>	From 2016 , , ,	14.13年代的建筑的大学的	A F To a State of Land	۵,	
C		Control of the second state of the second se	<b>建筑层层层层</b>	7 7 4 4	一些公治产学的模式生
<u>d</u>		<u> </u>	<u> </u>	۱,	
	From 2019	學是是學學數學學學的			<b>为许多的证据是对的物理。</b>
	Total of lines 3a through 3e	,		1	The state of the s
8	Applied to underdistributions of prior years	of the contract of the state of			
<u>h</u>	Applied to 2020 distributable amount	というない 神楽を変える		<u>:</u> 1	
<u> </u>	Carryover from 2015 not applied (see instructions)			v.*!	Mr. Bulleting House
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				1. 19 16 16 16 16 16 16 16 16 16 16 16 16 16
4	Distributions for 2020 from			3	
	Section D, line 7:		4 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1,1,0	
	Applied to underdistributions of prior years	Some of the state of			學性 法 网络拉拉克
_Ь	Applied to 2020 distributable amount	LOCAL PARTICIONS		7	
Ç	Remainder. Subtract lines 4a and 4b from line 4.	1 10 10 10 10	in the second	6,6	the second
_	Remaining underdistributions for years prior to 2020, if				
5	any. Subtract lines 3g and 4e from line 2. For result				
	greater than zero, explain in Part VI. See Instructions.		A 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	-,-	
6	Remaining underdistributions for 2020. Subtract lines 3h			10	
	and 4b from line 1. For result greater than zero, explain in <b>Part VI.</b> See instructions.			, int	•
		The state of the s			13.75 Z. 14 SELE W. 1 16 G
7	Excess distributions carryover to 2021. Add lines 3  and 4c.		NAMES AND ASSESSED OF STREET	ارد خ ارد خ	
8	Breakdown of line 7:	8) 92 YZ 2013 TAN 1919	CONTRACTOR OF THE PROPERTY OF THE	**	
A	Excess from 2016	W. A. W. Takasa Casa		72,1	
ь	Excess from 2017		A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	S)	
C	Excess from 2018 ,	PART NAME OF THE PART OF THE P	NAMES OF THE PARTY OF	111	
d	Excess from 2019			(X)	
	Excess from 2020				
		D	A. S. C.	MI T	

Schedule A (Form 980 or 990-EZ) 2020

Schedule A (F	orm 990 or 990-E2) 2020 Page 8
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, Ilnes 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, Ilnes 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, Ilne 1; Part V. Section B, line 1e; Part V, Section D, Ilnes 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See Instructions.)
	·
	***************************************
	·
***********	#1.144.4.4.4
	**************************************
************	
	***************************************
•••••	***************************************
	***************************************
*******	
	177077777117111111111111111111111111111
• • • • • • • • • • • • • • • • • • • •	
**********	
• • • • • • • • • • • • • • • • • • • •	
	***************************************
	***-***********************************
	***************************************
**-*	
	,
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	***************************************
,,,,	·
***	
	\ 
	***************************************
	***************************************
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	***************************************
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	***************************************

Schedule A (Form 990 or 990-EZ) 2020

#### SCHEDULE D (Form 990)

## **Supplemental Financial Statements**

► Complete II the organization answered "Yee" on Form 980, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

OMB No. 1545-0047 2020 Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury ▶ Go to www.irs.gov/Form990 for Instructions and the latest information.

Complete if the organization answerd "Yes" on Form 990, Part IV, line 6.	VALI	EY OF THE SUN SCHOOL PROPERTIES TWO			<b></b>	86-0807244	
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.  1 Total number at end of year 2 Aggregate value of orrithuitions to (during year) 3 Aggregate value of orrithuitions to (during year) 4 Aggregate value of orrithuitions to (during year) 5 Did the organization inform all conors and donor advisors in writing that the assets held in donor advised funds are the organization inform all conors and donor advisors in writing that grant funds can be used only for charifable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermisable private benefit?  1 Purpose(s) of conservation Easements.  Complete if the organization answered "Yes" on Form 990, Part IV, line 7.  1 Purpose(s) of conservation easements held by the organization (check all that apply).  1 Preservation of an attract habitat  1 Preservation of an attract habitat  2 Preservation of part by benefit or the organization held a qualified conservation or advisor in the form of a conservation easement on the last day of the tax year.  2 Total number of conservation easements  3 Total organization and the seaments on a conflided historic structure included in (a)  3 Number of conservation easements included in (a) acquired after 7725/06, and not on a historic attructure included in (b) acquired after 7725/06, and not on a historic attructure listed in the National Register  3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year?  4 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the year of the sease of the preservation of expense incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year organization and the National Register  3 Number of conservation easement reported on time 2(d) above satisfy the requirements of expense attements during the year organization and the nearement easem		Organizations Maintaining Donor Advi	sed Funds or Other Sim	llar Funds o			
1 Total number at end of year		Complete if the organization answered "	Yes" on Form 990, Part I\	/, line 6.			
2 Aggregate value of contributions to (turing year)			(a) Donor advised fund	9	(b) Fund	e and other accounts	
Aggregate value of grants from (during year)  Aggregate value at end of year  Did the organization inform all donors and donor advisors in writing that the assets hald in donor advised funds are the organization inform all donors and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donors divisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisors or writing that grant funds can be used only for charitable purposes private benefit?  Portugose(s) of conservation Easements.  Complete if the organization answered "Yes" on Form 990, Part IV, line 7.  Purpose(s) of conservation easements held by the organization (check all that apply).  Preservation of a post public use for example, ecreation or advisors in Preservation of a contribution in the form of a conservation easement on the less day of the tax year.  Proservation of open space  Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the less day of the tax year.  Total number of conservation easements.  2a less through 2d if the organization held a qualified conservation organization that the third of the Tax Year 2 less through 2d if the organization held a qualified conservation organization to the less day of the tax year.  Total number of conservation easements.  2a less through 2d if the organization easements.  3 Number of conservation easements and excelled historic structure included in (a).  2 less through 2d less through 2d in the property subject to conservation easement is located less through 2d less through	1						
4 Aggregate value at end of year	2					<u> </u>	
Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive signal control?	3	Aggregate value of grants from (during year)					
funds are the organization's property, subject to the organization's exclusive lagal control?     Point	4	,					
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?  Part II Conservation Easements.  Complete if the organization answered "Yes" on Form 990, Part IV, line 7.  1 Purpose(s) of conservation easements held by the organization (check all that apply).    Preservation of and to public use (for example, recreation or education)   Preservation of a historically important land area.    Protection of natural habitat   Protection of natural habitat   Protection of natural habitat   Preservation of spen space   Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the lest day of the tax year.  1 Total acreage restricted by conservation easements.  2 Interpret of conservation easements are a corfilled historic structure included in (s).  2 Interpret of conservation easements are a corfilled historic structure included in (s).  2 Interpret of conservation easements included in (s) acquired after 7/25/06, and not on a historic attructure included in the National Register.  3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year    3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year    4 Number of atlates where property subject to conservation easement is located    5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year    5 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year    5 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing con	5	Did the organization inform all donors and donor a	advisors in writing that the	essets held l	n donor a	ivised	
only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?    Port II		funds are the organization's property, subject to the	organization's exclusive tag	gal control? .		🔲 Yes 🗀	No
conferring impermissible private benefit?    Port II   Conservation Easements.   Complete if the organization answered "Yes" on Form 990, Part IV, line 7.    Purpose(s) of conservation easements held by the organization (check all that apply).   Preservation of and for public use (for example, recreation or education)   Preservation of a historically important land area   Protection of natural habitat   Preservation of open space   Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.   Total number of conservation easements   Preservation open space   Number of conservation easements   Preservation open space   Number of conservation easements included in (a)   2b   2c   2d   2d   2d   2d   2d   2d   2d	6	Did the organization inform all grantees, donors, ar	nd donor advisors in writing	that grant fur	nds can be	e used	
Conservation Easements.		only for charitable purposes and not for the benefit	t of the donor or donor adv	isor, or for an	y other pu		
Complete if the organization answered "Yes" on Form 990, Part IV, Ilne 7.    Purpose(s) of conservation easements held by the organization (check all that apply):   Preservation of land for public use (for example, recreation or education)   Preservation of a historically important land area   Protection of natural habitat   Preservation of pans pace				<u>.</u> , , , ,		· · 🗌 Yes 🔲	No
Purpose(s) of conservation easements held by the organization (check all that apply).    Preservation of land for public use (for example, recreation or education)   Preservation of a historically important land area   Protection of natural habitat   Preservation of a certified historic structure   Preservation of certified historic st	Pai						
Preservation of land for public use (for example, recreation or education)   Preservation of a historically important land area   Protection of natural habitat   Preservation of open space   Preservation of open space   Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax yeer.  a Total number of conservation easements   28							
Protection of natural habitat	1						
Preservation of open space							ı
2 Complete lines 2st through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.  Total number of conservation easements.  Number of conservation easements on a certified historic structure included in (a).  Number of conservation easements included in (a) acquired after 7/25/06, and not on a historic structure listed in the National Register.  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year.  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year.  Number of states where property subject to conservation easement is located.  Number of states where property subject to conservation easement is located.  Number of states where property subject to conservation easement is located.  Number of states where property subject to conservation easement is located.  Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the yea.  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the yea.  **S**  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the yea.  **S**  **S**  **Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the yea.  **S**  **Dess each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(li)  and section 170(h)(4)(B)(li)?  **Post In Part XIII, describe how the organization reports conservation easements in its revenue and expenses statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements? In th		<u></u>	⊔ Pres	ervation of a t	certified hi	storic structure	
easement on the last day of the tax year.  Total number of conservation easements Total acreage restricted by conservation easements Number of conservation easemente on a certified historic structure included in (a) Number of conservation easements encluded in (c) acquired after 7/25/06, end not on a historic structure listed in the National Register  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements in holds?  Number of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Notice of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Notice of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Notice of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Notice of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Notice of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Notice on severation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's accounting for conservation easements.  Port III Organization Maintaining Collections of Art, Historical Treasures, or Other Similar assets.  Complete if the organization easement easets held for public exhibition,	^		at a la contra de la contra de				
Total number of conservation easements  Total acreage restricted by conservation easements  Number of conservation easement on a certified historic structure included in (a)  Number of conservation easements included in (c) acquired after 7/25/06, end not on a historic structure listed in the National Register  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶  Number of states where property subject to conservation easement is located ▶  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  Poss each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)   Yes   No.    In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnots to the organization's incounting for conservation easements.  Point III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  If the organization elected, as permitted under FASB ASC 956, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public ervice, provide in Part XIII the text of the footnote to its financial statements that describes these items.  If the organization elected, as permitted under FASB ASC 956, to report in its revenue statement and balance sheet works	Z	Complete lines 28 through 20 if the organization hel	a a qualified conservation of	ontribution in			
b Total acreage restricted by conservation easements . 2b		•			<b>├</b>	id at the End of the Tax	Year
C Number of conservation easements on a certified historic structure included in (a)	_		• • • • • • • •				
Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶  Number of atates where property subject to conservation easement is located ▶  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?						<del></del>	
Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year.  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year.  Number of states where property subject to conservation easement is tocated.  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year.  Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year.  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year.  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year.  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year.  Post III.   Year   No.   Year   No.    In Part XIII, describe how the organization reports conservation easements in its revenue and expense attenment and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheel works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance							
Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶  Number of states where property subject to conservation easement is located ▶  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items:  If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service provide the following amounts relating to these items:  If the organization received or held works of art, historical treasures, or o	•	historic structure listed in the National Register	u) acquired after 7/25/06, 1	end not on e			
A Number of states where property subject to conservation easement is located ▶  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	3					organization dudno	- the
Number of states where property subject to conservation easement is located ▶  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the yea ★  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the yea ★  B Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(iii)?  In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  If the organization elected, as permitted under FASB ASC 956, not to report in its revenue statement and balance sheel works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  If the organization elected, as permitted under FASB ASC 956, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service provide the following amounts relating to these items:  If the organization received or held works of art, historical ireasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these item	•		ronda, rondadaa, axiingaran	30, Or 15///ii/d	nou by the	organization during	,
Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the yea handling of violations, and enforcing conservation easements during the yea handling of violations, and enforcing conservation easements during the yea handling of violations, and enforcing conservation easements during the yea handling conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  Is if the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X  If the organization received or held works of art, historical treasures, or other similar assets for financi	4		ation easement is located	•			
Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   \$  Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)   and section 170(h)(4)(B)(ii)?	5	Does the organization have a written policy regi	arding the periodic monito	ring, inspecti	lon, handi	ing of 🗌 Yes 🔲	No
Does each conservation easement reported on fine 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization reports conservation easements in its revenue and expanse statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization enswered "Yes" on Form 990, Part IV, line 8.  If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part X  If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:  Revenue included on Form 990, Part X  Assets included in Form 990, Part X	6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and	d enforcing co	nservation (	easements during the	yea
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art, Historical Treasures, 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 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part X	7		g, handling of violations, and o	enforcing cons	servation e	ssements during the	yea
balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public services provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part X  If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:  A Revenue included on Form 990, Part X  Assets included on Form 990, Part X  Assets included on Form 990, Part X  Assets included in Form 990, Part X	8	Does each conservation easement reported on line 2 and section 170(h)(4)(B)(ii)?	(d) above satisfy the require	ments of sect	lon 170(h)(	4)(B)(i) <b>  Yes  </b>	No
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service provide the following amounts relating to these items:  (I) Revenue included on Form 990, Part X	9	balance sheet, and include, if applicable, the text of	the footnote to the organiza				18
of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X  2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:  a Revenue included on Form 990, Part X  b Assets included in Form 990, Part X	Part				er Simila	r Assets.	
art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part VIII, line 1	18	of art, historical treasures, or other similar assets	held for public exhibition, e	education, or	research	in furtherance of pu	
(ii) Assets included on Form 990, Part VIII, line 1	b	art, historical treasures, or other similar assets held provide the following amounts relating to these item	for public exhibition, educat s:	ion, or resear	ch in furth	erance of public sen	vice
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:  a Revenue included on Form 990, Part VIII, line 1  b Assets included in Form 990, Part X		(i) Revenue included on Form 990, Part VIII, line 1	• • • • • • • • • • • • • • • • • • •	. ,	•	\$s	
following amounts required to be reported under FASB ASC 958 relating to these items:  a. Revenue included on Form 990, Part VIII, line 1	2	If the organization received or held works of set	historical transumes or etha	 Se almilae non.	ato for fla	مصنعت معام اعتماد	Har
b Assets included in Form 990, Part X		following amounts required to be reported under FA	SB ASC 958 relating to thea	e items:		•	
The Manual Manual of Addison and the Instance of the Instance	_	Assets included in Form 990 Pert Y				<b>5</b>	
						Schodule D (Form com	2044

Schedu	ule D (Form 990) 2020								Page 2
Par	Organizations Maintaining	Collections of	Art, His	torical T	reasures	, or O	her Similar A	ssets (con	tinued)
3	Using the organization's acquisition, collection items (check all that apply)	accession, and of							
	☐ Public exhibition		đ	☐ Loan	or exchang	e prog	ram		
þ	Scholarly research		0	☐ Other					
G	Preservation for future generations	3						****************	
4	Provide a description of the organiza XIII.	tion's collections	and expl	ain how t	hey further	the or	ganization's ex	empt purpos	e in Part
	During the year, did the organization assets to be sold to raise funds rathe	r than to be mainte	donation	ns of art, part of the	historical t organizat	reasure ion's co	s, or other sim diection?	ilar . 🔲 Yes	□ No
Par	Escrow and Custodial Arra								
	Complete If the organization 990, Part X, line 21.						•		Form
1 <b>a</b>	Is the organization an agent, trustee included on Form 890, Part X?	, austodian or oth	ner interr	nediary fo	or contribu	tions o	r other assets	not . 🔲 <b>Yes</b>	□ No
Ь	If "Yes," explain the arrangement in P	art XIII and compl	ele lhe fo	ollowing to	able:				
								Amount	
C	Beginning balance					19			
d			•			10	1	. <u> </u>	
						10			
f •••	Ending balance					1			
28	Did the organization include an amou	nt on Form 990, P	art X, line	9 21, for <b>a</b>	scrow or c	ustodia	i account liabili	ty? ∐ Yes	
Par	If "Yes," explain the arrangement in P	MIL AIII. CHECK HE	e ii rue e	xpianatioi	n nas been	provia	ed on Part XIII	<u>* 1 1 1 1                             </u>	<u> </u>
. 641	Complete if the organization	anewered "Vec	" on Foi	m 000 F	Part IV Juni	a 10			
	Complete if the organization	(a) Current year	<del></del>	lar year	(0) Two year		(d) Three years bu	sck (a) Four y	eers beek
1a	Beginning of year balance	(a) Content year	(0) **	or your	(O) I WO YEE	IN DRCK	(u) mea years u	ack (B) roury	dare cack
ь	Contributions	·	<del></del>						
c	Net Investment earnings, gains, and lossos					<del></del>			
d	Grants or scholarships		<del>                                     </del>				*****		
ė	Other expenditures for facilities and	· · · · · ·	<u> </u>	_				<del></del>	
_	programs								
1	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of t	the current year er	id baland	e (line 1a	. column (a	i)) held	<b>83</b> :		
8	Board designated or quasi-endowmen	nt ▶	%	, ,	,	••			
ь	Permanent endowment ▶	%	•••						
C	Term endowment ▶ %								
	The percentages on lines 2s, 2b, and	2o should equal 1	00%.						
3a	Are there endowment funds not in the	e possession of th	ne organi	zation the	at are held	and ad	ministered for	1he	
	organization by:							Y	es No
	(i) Unrelated organizations ,							3a(i)	$\bot$
	(ii) Related organizations					•		3a(ii)	
_	If "Yes" on line 3a(il), are the related o							. <u>3b</u>	
4	Describe in Part XIII the intended uses		on's ende	owment fu	Inds.				
Part	,		v	000 F	5 B/ P		0 5 00	5 B- 4 W W	4.5
	Complete if the organization			T					
	Description of property	(e) Coal or of			r other basis ther)	d	Accumulated apreciation	(d) Book	value
18	Land	· .	0		80,834	132	a* (4, 18), μ.,		80,8 <u>34</u>
þ	Buildings	·	0		310,745		187,801		122,944
C	Leasehold improvements	·	0	ļ <u>- —</u>	525,130		293,517		231,613
d	Equipment	·	0		5,300		5,300		0
<u> </u>	Other . ,	<u> </u>	0	<u>.                                    </u>	0	<u> </u>	0		
16701	Add lines 1a through 1e. (Column (d) n	nust equal Form 9	90, Part 2	x, column	(B), line 10	<i>ж.</i> ) .	<u> ▶  </u>		435,391

Schodula D (Form 990) 2020

	Investments—Other Securities.		Pe
	Complete if the organization answered "Yes" on Form 990, F  (a) Description of security or category (Including name of security)	Part IV, line 11b. See (b) Book value	(c) Method of valuation
(1) Financial		<del> </del>	Cost or end-of-year market ve
	neld equity Interests	'	···
(3) Other		· ·	<del></del>
(A)			
(B)			
(C)	***************************************		
(D)	*****-*********************************		
<u></u>	***************************************		<u> </u>
(F)	***************************************		
( <u>G)</u> (H)		•••••	<del> </del>
	mn (b) must equal Form 990, Part X, col. (B) line 12.) 🔒 🕨		FERRISO WARREN AND ST
Part VIII	Investments - Program Related.	!	Landinate national recent
	Complete if the organization answered "Yes" on Form 990, F	Part IV. line 11c. See	Form 990, Part X, line 15
	(a) Description of investment	(b) Book value	(c) Method of valuation:
			Cost or end-of-year market ve
(1)		<u> </u>	
(2)			
(3)			
(4)			
(6)	<u> </u>		
( <del>8</del> )			
(8)			
(9)			
	nn (b) must equal Form 990, Part X, col. (B) line 13.)		1000
Part IX	Other Assets.		19 / / / / / / /
	Complete if the organization answered "Yes" on Form 990, F	Pert IV, line 11d, See	Form 990, Part X, line 1s
	(a) Description		(b) Book value
	·		
	for Replacements		96
	l Receipts		98
(3) Tenant d			
(3) Tenant d (4)	l Receipts		1
(3) Tenant d (4) (5)	l Receipts		1
(3) Tenant d (4) (5)	l Receipts		1
(3) Tenant d (4) (5) (6) (7)	l Receipts		1
(3) Tenant d (4) (6) (6) (7) (8)	l Receipts		1
(3) Tenant d (4) (5) (6) (7) (8)	Receipts leposils held in trust		5
(3) Tenant d (4) (5) (6) (7) (8)	l Receipts		1
(3) Tenant d (4) (6) (6) (7) (6) (9) otal. (Colum	nn (b) must equal Form 990, Part X, col. (B) line 15.)	Part IV, line 11e or 11	. 103
(3) Tenant d (4) (6) (6) (7) (6) (9) otal. (Colum	nn (b) must equal Form 990, Part X, col. (B) line 15.)	Part IV, line 11e or 11	. 103
(3) Tenant (4) (4) (6) (6) (7) (6) (9) Total. (Column Part X	In (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete If the organization answered "Yes" on Form 990, F line 25.	Part IV, line 11e or 11	. 103
(3) Tenant d (4) (6) (6) (7) (6) (9) otal. (Colum Part X	Inn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete If the organization answered "Yes" on Form 990, F line 25.  (a) Description of liability come taxes	Part IV, line 11e or 11	1 5 103 1. See Form 990, Part X,
(3) Tenant (4) (4) (5) (6) (7) (6) (9) Total. (Column Part X  (1) Federal Inc. (2) Due to R	Inn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete If the organization answered "Yes" on Form 990, Pline 25.  (a) Description of liability  come taxes elated entity	Part IV, line 11e or 11	1 5 5 5 5 5 5 6 5 6 5 6 5 6 5 6 5 6 5 6
(3) Tenant of (4) (6) (7) (6) (9) Tenant X  (1) Federal Inc. (2) Due to R. (3) Tenant s.	Inn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete If the organization answered "Yes" on Form 990, F line 25.  (a) Description of liability come taxes	Part IV, line 11e or 11	1 5 5 103 f. See Form 990, Part X,
(3) Tenant of (4) (6) (6) (7) (6) (9) Tenant X  (1) Federal Inc (2) Due to R: (3) Tenant s: (4)	Inn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete If the organization answered "Yes" on Form 990, Pline 25.  (a) Description of liability  come taxes elated entity	Part IV, line 11e or 11	1 5 5 5 5 5 5 6 5 6 5 6 5 6 5 6 5 6 5 6
(3) Tenant of (4) (6) (6) (7) (6) (9) Tenant X  (1) Federal Inc (2) Due to R (3) Tenant s (4) (5)	Inn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete If the organization answered "Yes" on Form 990, Pline 25.  (a) Description of liability  come taxes elated entity	Part IV, line 11e or 11	1 5 5 5 5 5 5 6 5 6 5 6 5 6 5 6 5 6 5 6
(3) Tenant of (4) (6) (6) (7) (6) (7) (6) (7) (7) (7) (7) (7) (8) (8) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9	Inn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete If the organization answered "Yes" on Form 990, Pline 25.  (a) Description of liability  come taxes elated entity	Part IV, line 11e or 11	1 5 5 5 5 5 5 6 5 6 5 6 5 6 5 6 5 6 5 6
(3) Tenant of (4) (6) (6) (7) (6) (7) (6) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7	Inn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete If the organization answered "Yes" on Form 990, Pline 25.  (a) Description of liability  come taxes elated entity	Part IV, line 11e or 11	1 5 5 5 5 5 5 6 5 6 5 6 5 6 5 6 5 6 5 6
(3) Tenant of (4) (6) (6) (7) (6) (7) (6) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7	Inn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete If the organization answered "Yes" on Form 990, Pline 25.  (a) Description of liability  come taxes elated entity	Part IV, line 11e or 11	1 5 5 5 5 5 5 6 5 6 5 6 5 6 5 6 5 6 5 6
(3) Tenant of (4) (6) (6) (7) (6) (9) Otal. (Column Part X (2) Due to R (3) Tenant s (4) (5) (6) (7) (6) (9)	Inn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete If the organization answered "Yes" on Form 990, F line 25.  (a) Description of liability  come taxes elated entity ecurity deposits	Part IV, line 11e or 11	1 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
(3) Tenant of (4) (6) (6) (7) (6) (7) (6) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7	Inn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete If the organization answered "Yes" on Form 990, Pline 25.  (a) Description of liability  come taxes elated entity		103 f. See Form 990, Part X,  (b) Book value  56, 2

Schedu	ie D (Form 990) 2020			Paga <b>4</b>
Part	XI Reconciliation of Revenue per Audited Financial State	ments With	Revenue per Return.	7 4 6 0 7
-	Complete if the organization answered "Yes" on Form 99		e 12a.	
1	Total revenue, gains, and other support per audited financial statemen	nts	1	21,097
2	Amounts included on line 1 but not on Form 990, Part Vill, line 12:	1 - 1	# 1 A C	
8	Net unrealized gains (losses) on investments		0 7	
—— <mark>с</mark> -	Donated services and use of facilities	. 2b		
d	Other (Describe in Part XIII.)			
	Add lines 2a through 2d		<b>2e</b>	_
3	Subtract line 2a from line 1		3	21,097
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	· i · i ·		21,077
a	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a		
þ	Other (Describe in Part XIII.)	. 4b	0 333	
C	Add lines 4e and 4b		4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, II	ine 12.)	6	21,097
Part		tements With	Expenses per Return.	
	Complete If the organization answered "Yes" on Form 99	0, Part IV, Ilne	e 12a.	
1	Total expenses and losses per audited financial statements			34,493
2_	Amounts included on line 1 but not on Form 990, Part IX, line 25; Doneted services and use of facilities	1-1		
A h		<del></del>		
D Q	Prior year adjustments	2b	O	
ď	Other (Describe in Part XIII.)			
e	Add lines 2a through 2d		20	
3	Subtract line 2e from line 1		3	34,493
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		· · · · · <del>- · ·</del>	51/120
8	Investment expenses not included on Form 990, Part VIII, line 7b	. 40	o  '.' '.'	
ь	Other (Describe in Part XIII.)	. 4b	0 '	
-	Add lines 4a and 4b			
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I,	line 18.)	, 5	34,493
	XIII Supplemental Information.			
Providi 2. Part	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this p	and 4; Part IV,	lines 1b and 2b; Part V, line	4; Part X, line
Ç, I Bri	· · ·	•	•	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
				•
	·	····		
		***	*******************************	****
			<u> </u>	
	***************************************		************************************	
******			***************************************	
,				••••••
			**************************************	
	**************************************			
·	***************************************		L	
			·	
	^	*****	*****************************	
	***************************************		***************************************	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
•••••			***************************************	***

Schedulo D (Form 990) 2020

SCHEDULE O (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 890 or 890-BZ or to provide any additional information.

► Attach to Form 880 or 980-FZ

Open to Public

OMB No. 1545-0047

Department of the Treasury ▶ Go to www.ire.gov/Form890 for the latest information. Internal Revenue Service Inspection Name of the organization Employer identification number **VALLEY OF THE SUN SCHOOL PROPERTIES TWO** 86-0807244 Form 990, Part VI, Section A, Line 3 - Agency uses a management company to pay operating expenses, calculate tenant rents and maintain compliance with HUD reulations. Form 990, Part VI, Section A, Line 8b - There are no committees with authority to act on behalf of the Board Form 990, Part VI, Section B, Line 11b - Form 990 is prepared by CFO of a related entity and reviewed by CEO of a related entity. Both individuals are Board members. Form 990, Part VI, Section C, Line 19 - All documents are made available upon request.

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

Cat. No 51056K

Schedule O (Form 990 or 990-EZ) 2020

SCHEDULE R (Form 990)

Department of the Treasury Internal Pevenue Service dane of the organization VALLEY OF THE SUN SCHOOL PROPERTIES TWO

Partí

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, Ine 33, 34, 35b, 36, or 37. ► Attach to Form 990.

► Go to www.irs.gov/Form890 for instructions and the latest information.

Open to Public Inspection 2020

OMB No. 1545-0047

86-0807244

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EN (il applicable) of disregarded emby	(b) Primary activity	(c) Legal demicile (state or foreign country)	(ed) Todgi noome	(a) End-of-year assets	(i) Direct controlling entity
(1)					
				-	
( <del>d)</del>					
	-				
(8)					
Part II Rentification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax war.	izations. Complete if the organization during the tax year	answered "Yes" o	ın Form 990, Ра	rt IV, line 34, bec	ause it had

Legal domicle (state or foreign country)	(4) Exempt Code section	(e) Public chanty status (if section 501(c)(3))	Ofrect controlling entity	Section 512(b)(13) controlled entity?	28 5 28 5 28 5 28 5 28 5 28 5 28 5 28 5
				Yes	욷
AZ	501 (C)(3)	٢	NA.		Ĺ
	,				<b>,</b>
AZ	501(C)(3)	12	VALLEYLIFE		<u>.</u>
			_		,
AZ	501(C)(3)	•	VALLEYUFE		
			-		>
42	501(C)(3)	6	VALLEYUFE		
1					,
AZ	501(C)(3)	6	VALLEYLIFE		'
			,		•
AZ	501(C)(3)	6	VALLEYUFE		'
			-		>
AZ	501(C)(3)	6	VALLEYUFE		'
			-		>
	501(C)(3)	6		ALLEYUFE Chadide B	ALLEYUFE
		Cat. No.	501 (C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3)	501 (C)(3) 7 NVALL 501(C)(3) 11 VALL 501(C)(3) 9 VALL 501(C)(3) 9 VALL 501(C)(3) 9 VALL 501(C)(3) 9 VALL Cat. No. 50135Y	501 (C)(3) 7 501(C)(3) 9 501(C)(3) 9 501(C)(3) 9 501(C)(3) 9 501(C)(3) 9

Schedule R (Form 990) 2020	m 990) 2020 Identification of Related Organizations T	elated Organiz	ations Taxable	sas a Partner	rship. Come	Jete if the	organizati		\ \{\frac{1}{2}\}	Po Form 900	<u>}</u>	<u>:</u>	Page 2
	because it had one or more related organizations treated as a partnership during the tax year.	or more related	d organizations	treated as a p	artnership (	during the 1	ax year.		3			יייינים מיייים	
(st) Name, address, and EIN of related organization	s, and EN of arization	(D) Primary activity	(c) Lingal domicile State or foreign coursy)	(d) Direct controlling entity	Predominant moome (related, graculed from unrelated, graculed from use under sections 512—514)	Sha lating of, from 1-514)	Share of total S	(b) Share of end-of- year assets	Obgropodorates alocatora?	Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	R General or (20 managing (<1 pairmer?	전 80 년 전 80 년 8	Percentage ownership
		<i>'</i>					`		Yes		Yes	8	
					.,,_								
8													
<b>5</b>													
₹.						_	-					+	
Ð													
•						-					-	-	
6									-			+-	
Partiv Iden	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.	elated Organiz	ations Taxable s related organi	axable as a Corporation or Trust. Complete if the organization a organization at organizations treated as a corporation or trust during the tax year.	atton or Tr dasacom	st. Compl	ete if the c rust during	organizatio g the tax yo	in answer	ed "Yes" on	Form 994	O, Part	, ≤
Name, addre	(a) Name, address, and EIN of related organization	organization	(b) Primary activity	(c) Legal domicile (state or fertign outside)		(40) Direct controlling entity	ie) Type of entity (C comp. S comp. or trust)		Share of total	Share of end-of-year assets	(N) Parcentage ownership	Section 2	(i) Section 512(p)(13) controlled entity?
}	`											Yes	¥
Ę,													
8													
Đ.								<u> </u>					
£			_										
•													
<b>(6)</b>	,											<u> </u>	
a													
						i i				***	Schedule R (Form 990) 2020	Form 9	90) 2020

Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Schedule R (Form 980) 2020 Pari V

Page 3

Schedule R (Form 990) 2020 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. Method of determining amount involved 7 9 Ē During the tax year, did the organization engage in any of the following transactions with one or more related organizations fisted in Parts II-IV? (c) Amount analyed Transaction type (a - s) Performance of services or membership or fundraising solicitations for related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity Lease of facilities, equipment, or other assets from related organization(s) Sharing of paid employees with related organization(s) . . . . . . . . . . . Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. Lease of facilities, equipment, or other assets to related organization(s) Loans or loan guarantees to or for related organization(s) Reimbursement paid to related organization(s) for expenses . . . Sale of assets to related organization(s) . . . . . . . . . . . . . Gift, grant, or capital contribution to related organization(s) Gift, grant, or capital contribution from related organization(s) Other transfer of cash or property from related organization(s) Loans or loan guarantees by related organization(s) . . . Reimbursement paid by related organization(s) for expenses Other transfer of cash or property to related organization(s) Varne of refated organization Purchase of assets from related organization(s) Exchange of assets with related organization(s) Dividends from related organization(s) • Ü v - **9** -E c o **Q b** N 囵  $\Xi$ E ស 9 Ø

Schedule R (Form 990) 2020									<del></del> .	Page 4
Part VI Unrelated Organizations Taxable as a Partnership. Complete # the organization answered "Yes" on Form 990, Part IV, line 37.	Taxable as a	Partnership.	. Complete If ti	he organiz	zation answerex	1 "Yes" on For	m 990, Pa	nt 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.	entity taxed as genization. See	a partnership instructions n	through which the	he organization for cert	ation conducted i	nore than five partnerships.	ercent of it	s activities (mea	isured by to	tal assets
(a) Name, address, and EN of emity	(b) Primary activity	(c) Legal domote (state or foreign country)	(d) Predordnant Income (related, unrelated, excluded from tex under	(e) Are all partners section 1 501(e)(3) organizations?	Share of total income	Share of end-of-year	(Neproportionale alocations?	Code V – UBI amount in box 20 of Schedule K-1 (Form 1065)	General or maraging partner?	Dd Percentage ownership
(1)				¥ 8			Yes No		Yes	
Ø										
ð			·					,		
(4)										
6		,								
9										
Ø			į						_	
(6)										
(5)										
(10)										
(11)	,									
<b>(13)</b>	`,									
વિજ	<b>P</b>									
<b>61)</b>										!
(s)										_
(16)										
								Sche	Schedule R (Form 990) 2020	1 990) 2020

ų.

Schedule R (F	Form \$90) 2020	Раде <b>5</b>
Part VII	Supplemental Information Provide additional Information for responses to questions on Schedule R. See instructions.	
F4141444444444444444444444444444444444		
		***************************************
	***************************************	***************************************
	***************************************	
	1801-181-11-11-11-11-11-11-11-11-11-11-11-1	
		******
	***************************************	
	······································	
		****************
***************************************		***************************************
***************************************		
******		
************	***************************************	
*		
***********	///////////////	
	***************************************	***************************************
************		***************************************
	······································	***************************************
*******		
***************************************		
	***************************************	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
***************************************		•••••••
***************************************		
***********		
	***************************************	
••••••	AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	
		<del>-</del>
	,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-	
	12/1-1/	
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
<del></del>	***************************************	***************************************
	***************************************	
	***************************************	
	\$\$\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\	
	······································	
	Schedul	e R (Form 880) 2020