Form **990-PF**

Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990PF for instructions and the latest information.

For	calend	dar year 2022 or tax year beginning , a	and ending				
Na	me of	foundation			A Emp	loyer identification nur	nber
D.	итт.	ANTHROPIECE FOUNDATION			84.	-1440983	
		and street (or P.O. box number if mail is not delivered to street a	address) Ro	oom/suite		phone number (see instr	uctions)
6	105	MONARCH ROAD			303	3-440-8484	·
City	or tov	wn, state or province, country, and ZIP or foreign postal code	•		C If over	emption application is per	nding check here
_ <u>L</u>	ONG	MONT CO 80503-8	818		C II GA	етприот аррисацот із рег	inding, check here.
G C	heck a	all that apply: Initial return Initial retur	rn of a former public o	charity	D 1. Fo	oreign organizations, che	ck here
		Final return Amended	return		2. Fo	oreign organizations mee	ting the
		Address change Name cha	ange		85	5% test, check here and	attach computation
H C	heck	type of organization: X Section 501(c)(3) exempt private	e foundation		E If pri	vate foundation status wa	as terminated under
	Section	n 4947(a)(1) nonexempt charitable trust Other taxable	le private foundation		secti	on 507(b)(1)(A), check h	ere
I Fa	ir mar	rket value of all assets at J Accounting method:	X Cash Acc	rual	F If the	foundation is in a 60-mo	onth termination
er	d of y	ear (from Part II, col. (c), Other (specify)			unde	er section 507(b)(1)(B), ch	neck here
lin	e 16)	\$ 17,480,896 (Part I, column (d), must	t be on cash basis.)				
Pa	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equ	(a) Revenue and	(b) Net inv	estment/	(c) Adjusted net	(d) Disbursements for charitable
		the amounts in column (a) (see instructions).)	books	incor	ne	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	142,042				(,
	2	Check if the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	431,490	43	31,490	431,490	
	5a	Gross rents	·		<u> </u>	·	
Φ	b	Net rental income or (loss)					
Ž	6a	Net gain or (loss) from sale of assets not on line 10	-251,729				
Revenue	b	Gross sales price for all assets on line 6a					
Re	7	Capital gain net income (from Part IV, line 2)			0		
_	8	Net short-term capital gain				0	
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less: Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule) STMT 1	-13,825	-1	L3,825	-13,825	
	12	Total. Add lines 1 through 11	307,978	41	L7,665	417,665	
xpenses	13	Compensation of officers, directors, trustees, etc.	24,000				24,000
Sus	14	Other employee salaries and wages	279,066				279,066
ğ	15	Pension plans, employee benefits	40,579				40,579
ш	16a	Legal fees (attach schedule)					
Š	b	Accounting fees (attach schedule) STMT 2	5,750				5,750
aţį	С	Other professional fees (attach schedule) STMT 3	99,115	9	99,115	99,115	_
str	17	Interest					
<u>≅</u>	18	Taxes (attach schedule) (see instructions) STMT 4	35,614	1	L5,614	15,614	
Administrative	19	Depreciation (attach schedule) and depletion					
Ă	20	Occupancy	7,686				7,686
and	21	Travel, conferences, and meetings	3,013				3,013
ā	22	Printing and publications					
g	23	Other expenses (att. sch.) STMT 5	820,694				820,694
Operating	24	Total operating and administrative expenses.					
ers		Add lines 13 through 23	1,315,517	11	L4,729	114,729	1,180,788
Q	25	Contributions, gifts, grants paid	0				0
	26	Total expenses and disbursements. Add lines 24 and 25	1,315,517	11	L4,729	114,729	1,180,788
	27	Subtract line 26 from line 12:					
	а	Excess of revenue over expenses and disbursements	-1,007,539				
	b	Net investment income (if negative, enter -0-)		30	02,936		
	С	Adjusted net income (if negative, enter -0-)				302,936	

	Part I			End o	of year
		should be for end-of-year amounts only. (See instructions	.) (a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing	264,864	1,527	1,527
	2	Savings and temporary cash investments	359,114	364,991	364,991
	3	Accounts receivable			
		Less: allowance for doubtful accounts			
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see			
		instructions)			
	7	Other notes and loans receivable (att. schedule)			
		Less: allowance for doubtful accounts 0			
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments – U.S. and state government obligations (attach schedule)			
	b	Investments - corporate stock (attach schedule) SEE STMT 6	11,946,986	11,071,250	12,960,444
	С	Investments - corporate bonds (attach schedule) SEE STMT 7	2,710,558	2,705,816	2,448,316
	11	Investments – land, buildings, and equipment: basis			
		Less: accumulated depreciation (attach sch.)			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule) SEE STATEMENT 8	798,394	928,793	1,705,618
	14	Land, buildings, and equipment: basis			
		Less: accumulated depreciation (attach sch.)			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers – see the			
		instructions. Also, see page 1, item I)	16,079,916	15,072,377	17,480,896
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ies	19	Deferred revenue			
Ξį	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe)			
Ц	23	Total liabilities (add lines 17 through 22)	0	0	
ces		Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30.			
an	24	Net assets without donor restrictions			
Ba	25	Net assets with donor restrictions			
Þ		Net assets without donor restrictions Net assets with donor restrictions Foundations that do not follow FASB ASC 958, check here			
Fu		and complete lines 26 through 30.			
'n	26	Capital stock, trust principal, or current funds			
ts.	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
se	28	Retained earnings, accumulated income, endowment, or other funds	16,079,916	15,072,377	
As	29	· /······ / · · · · · · · · · · · · · ·			
Net Assets or Fund Balar	30	Total liabilities and net assets/fund balances (see	1.5 0.50 0.1.5	45 050 055	
_		instructions)	16,079,916	15,072,377	
_	Part I		101	Г	
1		net assets or fund balances at beginning of year - Part II, column (a), line 29 (m			16,079,916
_	end-of-year figure reported on prior year's return)				
2	: ⊨ntei	amount from Part I, line 27a		2	-1,007,539
3	Otne	r increases not included in line 2 (itemize)		3	15 072 277
4	Hud I	ines 1, 2, and 3			15,072,377
5	Decre	eases not included in line 2 (itemize) net assets or fund balances at end of year (line 4 minus line 5) – Part II, column	(b) line 20	6	15,072,377
_0	ાળાસ	net assets of fund palatices at end of year (line 4 minus line 5) – Part II, column	(D), III IE 28	o	10,014,311

04.004	Pa	art IV Capital Gains a	and Losses for Tax on Inves	tment Income			
C C C C C C C C C C		(a) List and describe the 2-story brick wareh	e kind(s) of property sold (for example, rea nouse; or common stock, 200 shs. MLC Co	estate, o.)	` P – Purchase		
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (i) Gains (Cot. (h) gain minus (g))	1a	PUBLICLY TRADE	D SECURITIES				
e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale (h) Cain or (loss) ((e) plus (f) minus (g)) a	b						
(e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis (h) Gain or (loss) as a Gain or (loss) b (or allowable) (or allowable) (or allowable) (b) plus expense of sale (los) plus (f) minus (g)) c c d (los) plus (f) minus (g) c c c d (los) plus (f) minus (g) c c c d (los) plus (f) minus (g) c c c c c c c c c c c c c c c c c c c							
(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis (h) Gain or floss) (e) plus (f) minus (g)) a							
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (i) FMV as of 12/31/69 (i) Adjusted basis (l) Adjusted basis (l) Excess of ou. (i) column (l), but not less than -0-) or Losses (from ool, (h)) or Losses (from ool, (h), the sharp of Losses (from ool, (h)) or Losses (from ool, (h), the sharp of Losses (from ool, (h), the sharp old, (h), the shar		(e) Gross sales price	()	1.07			
c Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (i) FMV as of 12/31/69		0	,	<u> </u>			
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. Complete only for assets showing gain in column (col. (h) and minus col. (k), but not less than -0-) or Losses (from col. (h)) Complete only for assets showing gain in column (col. (h) and minus col. (k), but not less than -0-) or Losses (from col. (h)) Complete only for assets showing gain in column (col. (h) and minus col. (k), but not less than -0-) or Losses (from col. (h)) Complete only for assets showing gain in column (col. (h) and col. (h) and col. (h) over col. (h) if any col. (h) and col. (h) over col. (h) if any col. (h) and col. (h) and col. (h) over col. (h) if any col. (h) and col. (h) over col. (h) if any col. (h) and col. (h) over col. (h) if any col. (h) and col. (h) over col. (h) if any col. (h) and col. (h) over col. (h) if any col. (h) and col. (h) if any col. (h) col. (h) and col. (h) if any col. (h) and col. (h) if any col. (h) col. (h) and col. (h) if any col. (h) col. (h) and col. (h) over col. (h) if any col. (h) and col. (h) if any col. (h) col. (h) and col. (h) if any col. (h) col. (h) and col. (h) over col. (h) if any col. (h) col. (h) col. (h) and col. (h) col. (2017.20
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (i) FMV as of 12/31/69 (ii) Adjusted basis as of 12/31/69 (iii) Adjusted basis as	С						
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (i) FMV as of 12/31/69 (ii) FMV as of 12/31/69 (iii) FMV as of 12/31/69 (iv) Excess of col. (iv) col. (iv) or Losses (from col. (iv)) o	d						
(i) FMV as of 12/31/69 (ii) Adjusted basis as of 12/31/69 (iv) Excess of col. (i) over col. (j), if any col. (k), but not less than -0-) or Losses (from col. (iii)) a				1			
Cosses (from col. (h)) Cosses (from col. (h))	(Complete only for assets showin					
b c d d d d d d d d d d d d d d d d d d		(i) FMV as of 12/31/69					
c d e 2 Capital gain net income or (net capital loss)	а						<u>-251,729</u>
c Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 Rear I, line 8 2							
Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 7 If gain, also enter in Part I, line 8 If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948—see instructions) If Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary—see instructions) All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b) Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- Catish/Payments: Code is set in a day and taxable foundations only; others, enter -0-) Exempt foreign organizations – tax withheld at source Catax paid with application for extension of time to file (Form 8868) Beckup withholding erroneously withheld Total credits and payments. Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here in Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount overpaid Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid							
2 Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 Part I, line 8 Part I, line 8 2 -257,771 Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948—see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary—see instructions) b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investments: a 2022 estimated tax payments and 2021 overpayment credited to 2022 6a 29,035 b Exempt foreign organizations – tax withheld at source 6b C Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here file form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 24, 824							
If (loss), enter -0- in Part I, line 7 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8. Part I, line 8. Part I, line 8 Seempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary—see instructions) All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- Exempt foreign organizations — tax withheld at source Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld Total credits and payments. Add lines 6 a through 6d Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount overaid If (loss), enter -0- in part I, line 7 1			If gain, also enter	n Part I, line 7			
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948—see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary—see instructions) b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 2 Add lines 1 and 2 3 4 , 211 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Credits/Payments: a 2022 estimated tax payments and 2021 overpayment credited to 2022 6 29 , 035 b Exempt foreign organizations – tax withheld at source c Tax paid with application for extension of time to file (Form 8868) 6 Ce d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here 6 form 220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	2 (Capital gain net income or (net	canital loss)			2	-251,729
Part I, line 8	3	Net short-term capital gain or (lo	— , , , ,	—			,
Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948—see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary—see instructions) b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 3 Add lines 1 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Credits/Payments: a 2022 estimated tax payments and 2021 overpayment credited to 2022 b Exempt foreign organizations – tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here file form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 1 4, 211 4 4, 211 4 7, 211 5 2 0 3 4, 211 6 2 29, 035	I	f gain, also enter in Part I, line 8	8, column (c). See instructions. If (loss), enter -0- in			
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6 Credits/Payments: a 2022 estimated tax payments and 2021 overpayment credited to 2022 b Exempt foreign organizations − tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 24,824	4	Subtitle A (income) tax (dome	stic section 4947(a)(1) trusts and taxa	ble foundations only;	others, enter -0-)	4	0
a 2022 estimated tax payments and 2021 overpayment credited to 2022 b Exempt foreign organizations – tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 24,824	5	Tax based on investment in	ncome. Subtract line 4 from line 3. If z	ero or less, enter -0-		5	4,211
b Exempt foreign organizations – tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 24,824	6	-		1	1		
to Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 24,824	а					,035	
d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 24,824		Exempt foreign organizations -	- tax withheld at source	<u>6</u> 1			
7 Total credits and payments. Add lines 6a through 6d 7 29,035 8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 24,824	_						
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed910 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid1024,824		Backup withholding erroneous	dd lines fo through fid	6			20 025
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed910 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid1024,824		Enter any nenalty for underes	avment of estimated tay Check bord	if Form 2220 is atta		/ / Q	43,033
Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 24,824		Tax due. If the total of lines 5	and 8 is more than line 7 enter amou	יין ויייין בצבט וא מוומ Int owed			
	10						24,824
	11						

Pa	rt VI-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			
	instructions for the definition	1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities.			
С	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. \$ (2) On foundation managers.\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers. \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Χ
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year? N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Χ
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	● By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	Χ	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	7	Χ	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. NONE			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2022 or the tax year beginning in 2022? See instructions for Part XIII. If "Yes,"			
	complete Part XIII	9	Χ	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		Х
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		Χ
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement. See instructions	12		Χ
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Χ	
	Website address WWW.PHILANTHROPIECE.ORG			
14	The books are in care of THE FOUNDATION Telephone no. 303-4	40-	848	4
	6105 MONARCH ROAD			
	Located at LONGMONT CO ZIP+4 80503	.		
15	0 (10.45()/4)			. L
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2022, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country			

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Pa	art VI-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			Х
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified	1a(1)		
	person?	1a(2)		Х
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)	Х	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)	Х	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or			
	use of a disqualified person)?	1a(5)		X
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation			
	agreed to make a grant to or to employ the official for a period after termination of government service, if			
	terminating within 90 days.)	1a(6)		X
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in			
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		X
С	Organizations relying on a current notice regarding disaster assistance, check here			
d	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2022? N/A	1d		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2022, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for			
	tax year(s) beginning before 2022?	2a		X
	If "Yes," list the years 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement – see instructions.) N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?	3a		X
b	If "Yes," did it have excess business holdings in 2022 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the			
	foundation had excess business holdings in 2022.) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable			
	purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize			
	its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning			
	in 2022?	4b		X

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Pa	art VI-B Statements Regarding Activities for Which I	Form 4720 May Be	e Required (d	continued)			<u> </u>
5a	During the year did the foundation pay or incur any amount to:		-			Yes	No
	(1) Carry on propaganda, or otherwise attempt to influence legislation (s	ection 4945(e))?			5a(1)		Х
	(2) Influence the outcome of any specific public election (see section 495						
	indirectly, any voter registration drive?				5a(2)		X
	(3) Provide a grant to an individual for travel, study, or other similar purp	oses?			5a(3)		Χ
	(4) Provide a grant to an organization other than a charitable, etc., organ						
	(4)(A)? See instructions				5a(4)		X
	(5) Provide for any purpose other than religious, charitable, scientific, lite	erary, or educational purp	ooses, or for				
	the prevention of cruelty to children or animals?				5a(5)		X
b		lify under the exceptions	described				
	in Regulations section 53.4945 or in a current notice regarding disaster a	assistance? See instructi	ons	N/ <u>A</u>	5b		
С	Organizations relying on a current notice regarding disaster assistance, or	check here					
d	If the answer is "Yes" to question 5a(4), does the foundation claim exemp	otion from the tax because	se it				
	maintained expenditure responsibility for the grant?			N/A	5d		
	If "Yes," attach the statement required by Regulations section 53.4945-5						
6a	Did the foundation, during the year, receive any funds, directly or indirectly	y, to pay premiums on a	a personal				
	benefit contract?				6a		X
b		on a personal benefit co	ntract?		6b		X
	If "Yes" to 6b, file Form 8870.						
7a	At any time during the tax year, was the foundation a party to a prohibited	d tax shelter transaction?	?		7a		X
b	If "Yes," did the foundation receive any proceeds or have any net income	e attributable to the trans	action?	N/A	7b		
8	Is the foundation subject to the section 4960 tax on payment(s) of more t	han \$1,000,000 in remu	neration or				
	excess parachute payment(s) during the year?				8		X
Pa	art VII Information About Officers, Directors, Truste	es, Foundation Ma	anagers, Higl	hly Paid Emp	oloye	es,	
	and Contractors						
1 1	List all officers, directors, trustees, and foundation managers and the	eir compensation. See	e instructions.		т —		
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		pense ao r allowa	
EI	LIZABETH C. COOK LONGMONT	PRESIDENT					
	105 MONARCH ROAD CO 80503	25.00	0	18,232			0
JC	DAN M. KNUDSON LONGMONT	VP					
61	105 MONARCH ROAD CO 80503	25.00	24,000	19,644	<u> </u>		0
C.	ATHY M. COOK LONGMONT	SECRETARY					
61	105 MONARCH ROAD CO 80503	5.00	0	0			0
2	Compensation of five highest-paid employees (other than those inc "NONE."	cluded on line 1 – see	instructions). If	none, enter			
	NONE.			(d) Contributions to			
	(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation		pense ad r allowa	
K.	ATHLEEN DOYLE MYERS LONGMONT	ED					
61	105 MONARCH ROAD CO 80503	35.00	104,450	0			0
.J.	OHN P. MATLAK LONGMONT	PROGRAM DIRE					
61	105 MONARCH ROAD CO 80503	40.00	77,692	0	<u> </u>		0
. JC	ORDAN BAILEY LONGMONT	PGM MGR					
61	105 MONARCH ROAD CO 80503	40.00	54,950	0	<u> </u>		0
					<u> </u>		
.	A complete of other complete or wild or the COO				 		
ıota	al number of other employees paid over \$50,000				<u> </u>		0

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Part VII Information About Officers, Directors, Trustees, Foundation	Managers, Highly Paid	Employees,
and Contractors (continued)		NONE "
3 Five highest-paid independent contractors for professional services. See instr		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
JPMORGAN CHASE BANK, N.A.DENVER370 17TH STREET, STE. 3200CO 80202	INV MANAGER	63,156
Total number of others receiving over \$50,000 for professional services		. 0
Part VIII-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical informorganizations and other beneficiaries served, conferences convened, research papers produced, etc.	nation such as the number of	Expenses
1 SEE STATEMENT 9		
		391,786
SEE STATEMENT 10		
		232,956
3 SEE STATEMENT 11		
		219,524
4		
Part VIII-B Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 ar	nd 2.	Amount
1 N/A		
<u> </u>		
2		
All other program-related investments. See instructions.		
3		

Form **990-PF** (2022)

Total. Add lines 1 through 3

Pa	art IX Minimum Investment Return (All domestic foundations must complete this part.	For	eign	foundations,
	see instructions.)			
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,			
	purposes:			
а	Average monthly fair market value of securities	. L	1a	17,838,889
b	Average of monthly cash balances	- 1	1b	300,541
С	Fair market value of all other assets (see instructions)	. L	1c	301,847
d	Total (add lines 1a, b, and c)		1d	18,441,277
е	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation)	0		
2	Acquisition indebtedness applicable to line 1 assets		2	0
3	Subtract line 2 from line 1d		3	18,441,277
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see	Ė		
	instructions)		4	276,619
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	· [5	18,164,658
6	Minimum investment return. Enter 5% (0.05) of line 5	.	6	908,233
Pa	art X Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private ope	rati	ng fo	oundations
	and certain foreign organizations, check here X and do not complete this part.)			
1	Minimum investment return from Part IX, line 6	. [1	
2a	Tax on investment income for 2022 from Part V, line 5			
b	Income tax for 2022. (This does not include the tax from Part V.)			
С	Add lines 2a and 2b		2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	
4	Recoveries of amounts treated as qualifying distributions		4	
5	Add lines 3 and 4	- 1	5	
6	Deduction from distributable amount (see instructions)		6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII,			
	line 1		7	
Pa	art XI Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
а	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	. L	1a	1,180,788
b	Program-related investments – total from Part VIII-B	- 1	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,			
	purposes	. L	2	
3	Amounts set aside for specific charitable projects that satisfy the:			
а	Suitability test (prior IRS approval required)	. L	3a	
b	Cash distribution test (attach the required schedule)	. [3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4	. [4	1,180,788

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Pa	art XII Undistributed Income (see instructions)				
		(a) Corpus	(b) Years prior to 2021	(c) 2021	(d) 2022
1	Distributable amount for 2022 from Part X, line 7				
2	Undistributed income, if any, as of the end of 2022:				
а					
b					
3	Excess distributions carryover, if any, to 2022:				
а	From 2017				
b					
С	From 2019				
d					
е					
f	Total of lines 3a through e				
4	Qualifying distributions for 2022 from Part XI,				
	line 4: \$1,180,788				
	Applied to 2021, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required – see instructions)				
С	Treated as distributions out of corpus (Election				
	required – see instructions)				
d	Applied to 2022 distributable amount				
е -		0			
5	Excess distributions carryover applied to 2022				
	(If an amount appears in column (d), the same				
•	amount must be shown in column (a).)				
6	Enter the net total of each column as				
_	indicated below:				
a	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 Prior years' undistributed income. Subtract				
D	line Ale from line Ole				
_	Enter the amount of prior years' undistributed				
·	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable				
-	amount – see instructions				
е	Undistributed income for 2021. Subtract line				
	4a from line 2a. Taxable amount – see				
	instructions				
f	Undistributed income for 2022. Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2023				
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)				
8	Excess distributions carryover from 2017 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2023.				
4.5	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:				
a	Excess from 2018				
b	Excess from 2019				
C C	Excess from 2020				
d	Excess from 2021				

P	art Alli Private Operating Fo	undations (see in	istructions and P	art vi-A, questiori	9)	
1a	If the foundation has received a ruling or	determination letter th	nat it is a private oper	rating		
	foundation, and the ruling is effective for				1	2/02/98
b	Check box to indicate whether the found	lation is a private oper	ating foundation desc	cribed in section X 49	42(j)(3) or 494	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum	(a) 2022	(b) 2021	(c) 2020	(d) 2019	(e) Total
	investment return from Part IX for					
	each year listed	302,936	556,871	188,166	272,646	1,320,619
b	85% (0.85) of line 2a	257,496	473,340	159,941	231,749	1,122,526
С	Qualifying distributions from Part XI,					
	line 4, for each year listed	1,180,788	876,944	872,326	846,692	3,776,750
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities.					
	Subtract line 2d from line 2c	1,180,788	876,944	872,326	846,692	3,776,750
3	Complete 3a, b, or c for the		·		·	
	alternative test relied upon:					
а	"Assets" alternative test – enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
b						
	of minimum investment return shown in					
	Part IX, line 6, for each year listed	605,489	686,189	563,636	536,555	2,391,869
С	"Support" alternative test – enter:					
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties)					
	and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income					
Pa	art XIV Supplementary Inform			f the foundation	had \$5,000 or n	nore in assets a
	any time during the y	<u>rear – see instru</u>	ctions.)			
1	Information Regarding Foundation N	_				
а	List any managers of the foundation who				•	
	before the close of any tax year (but only	y if they have contribu	ted more than \$5,000). (See section 507(d)	(2).)	
	ELIZABETH C. COOK					
b	List any managers of the foundation			•	n equally large por	tion of the
	ownership of a partnership or other entity	y) of which the founda	tion has a 10% or gre	eater interest.		
	N/A					
2	Information Regarding Contribution,		• • • • • • • • • • • • • • • • • • • •	-		
			-	able organizations and	•	
	unsolicited requests for funds. If the four		rants, etc., to individu	als or organizations ur	nder other conditions,	
	complete items 2a, b, c, and d. See instr					
а	The name, address, and telephone number 1000 CT 1000 C			n applications should b	e addressed:	
	ASSOCIACION FILANTRO					
	ZONA O, 04 AVENIDA					
b	The form in which applications should be	e submitted and inform	nation and materials the	hey should include:		
	SEE STATEMENT 12					
С	Any submission deadlines: SEE STATEMENT 13					
d	Any restrictions or limitations on awards,	such as by geograph	ical areas, charitable	fields, kinds of instituti	ons, or other	
	factors:	, 5 0 1				
	CEE CTATEMENT 1/					

Fart Aiv Supplementary information (continued)			
3 Grants and Contributions Paid During	the Year or Approved	<u>for Future Paymen</u>	t	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
N/A				
IV/ A				
		<u> </u>		
Total			3a	
b Approved for future payment				
N/A				
Total		·	3b	·

	Part XV-A	Analysis of income-Producing A	ctivities				
Er	iter gross amo	ounts unless otherwise indicated.	(a)	business income	(c) Exclusion	by section 512, 513, or 514	(e) Related or exempt function income
1	Program ser	vice revenue:	Business code	Amount	code	Amount	(See instructions.)
•	_						
	f						
		d contracts from government agencies					
2	Membership	dues and assessments					
3	Interest on s	avings and temporary cash investments				401 400	
		nd interest from securities			14	431,490	
5		come or (loss) from real estate:					
	a Debt-fina	anced property					
_	b Not debt	t-financed property					
6	Net rental in	come or (loss) from personal property					
6	Other investi	ment income			18	251 720	
ď	Gain or (loss	s) from sales of assets other than inventory			1 2	-251,729	
40	Cross profit	or (loss) from special events or (loss) from sales of inventory					
	Other revenu						
• •		ER VENTURES LOSS			14	-13,825	
		SK VENTOKED LODD			+	15,025	
	e						
12		d columns (b), (d), and (e)		0		165,936	C
13	Total. Add li	ine 12, columns (b), (d), and (e)					165,936
(S	ee worksheet	in line 13 instructions to verify calculations.)					
	Part XV-B	Relationship of Activities to the	Accomplish	ment of Exempt	t Purpe	oses	
	Line No.	Explain below how each activity for which income of the foundation's exempt purposes (other than					he accomplishment
_	N/A						
_							
_							
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Form 99	0-PF (20	22) PHILANTHE	ROPIECE	FOUNDA'	TION	1	84-1440	983			Pag	ge 13
Part		Information Reg Organizations	arding Tra	nsfers To a	and T	ransact	tions and Relation	nships \	With Nonchai	ritable	Exe	mpt
1 Dic			directly engage	e in any of the	followin	g with an	y other organization des	cribed			Yes	No
	_	01(c) (other than secti		-			-					
org	ganization	s?										
a Tra	ansfers fr	om the reporting found	dation to a no	ncharitable exe	mpt org	ganization	of:					
(1)	Cash									1a(1)		Х
(2)	Other a	ssets								1a(2)		X
b Otl	ner trans	actions:										
(1)	Sales of	f assets to a nonchari	table exempt	organization						1b(1)		Х
(2)	Purchas	ses of assets from a r	noncharitable e	exempt organiza	ation					1b(2)		Х
(3)	Rental of	of facilities, equipment	, or other asse	ets						1b(3)		X
(4)	Reimbu	rsement arrangement	S							1b(4)		Х
(5)	Loans o	r loan guarantees								1b(5)		X
(6)	Perform	ance of services or m	nembership or	fundraising sol	icitation	ıs				1b(6)		X
c Sh	aring of f	acilities, equipment, m	nailing lists, otl	her assets, or p	aid em	ployees				1c		Х
d If t	he answe	er to any of the above	is "Yes," com	plete the followi	ng sch	edule. Co	lumn (b) should always	show the	fair market			
		-	_		-		If the foundation receive					
(a) Li	ne no.	(b) Amount involved		of noncharitable exer			of the goods, other ass (d) Description of t		sactions, and sharing	arrangem	ents	
<u>N/A</u>												
0- 1-	tl f		-41					_				
			-			F070	ax-exempt organizations			□ v.	s X	1
		section 501(c) (other		501(c)(3)) or in	section	1 52/ ?				☐ T	3S [A] NO
<u> </u>		nplete the following so Name of organization	criedule.	(b) Type of	organizat	ion		(c) Description	on of relationship			
N/.		, reality of organization		(D) Type of	organizat			(b) Bosonpar	or relationship			
							chedules and statements, and		f my knowledge and I	pelief, it is	s true,	
	correct, ar	nd complete. Declaration of	preparer (other th	nan taxpayer) is bas	ed on all	information	of which preparer has any kno	owledge.	May the IRS dis	scuss this	return	\neg
Sign									with the prepare			- I
Here									See instructions	s. <u>X</u>	Yes	No
							PREST	IDENT				
	Signature	of officer or trustee				Date	Title				_	
	Print/Tv	pe preparer's name			Prepa	rer's signati	ure		Date		Charl	<u> </u>
											Check self-em	iployed
Paid	KENNI	ETH FICHTER			KENI	NETH I	FICHTER					
Prepare	I Firm's r	name KUNDI	INGER,	CORDER 8	<u>MC</u>	NTOY	A, P.C.		PTIN PO	2384	656	
Use Onl	Firm's a	address 475 I	LINCOLN	STREET,	SU	ITE :	200		Firm's EIN			

Phone no.

DENVER, CO 80203

Statement 1 - Form 990-PF, Part I, Line 11 - Other Income

Description	Revenue per Books	Net Investment Income	Adjusted Net Income
BETTER VENTURES LOSS	\$ -13,825	\$	\$ -13,825
TOTAL	\$ -13,825	\$0	\$ -13,825

Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees

Description	 Total	Net stment	-,	usted Net	Charitable Purpose		
KUNDINGER, CORDER & MONTOYA, P.C	\$ 5,750	\$	\$		\$	5,750	
TOTAL	\$ 5,750	\$ 0	\$	0	\$	5,750	

Statement 3 - Form 990-PF, Part I, Line 16c - Other Professional Fees

Description	 Total	_Ir	Net vestment	 Adjusted Net	naritable Purpose
JP MORGAN RW BAIRD & CO.	\$ 66,086 33,029	\$	66,086 33,029	\$ 66,086 33,029	\$
TOTAL	\$ 99,115	\$	99,115	\$ 99,115	\$ 0

Statement 4 - Form 990-PF, Part I, Line 18 - Taxes

Description	 Total	_lr	Net nvestment	 Adjusted Net	Charitable Purpose		
EXCISE TAX FOREIGN TAXES PAID	\$ 20,000 15,614	\$	15,614	\$ 15,614	\$		
TOTAL	\$ 35,614	\$	15,614	\$ 15,614	\$	0	

Statement 5 - Form 990-PF, Part I, Line 23 - Other Expenses

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
	\$	\$	\$	\$
EXPENSES				
COMPUTER EXPENSE	1,108			1,108
CONTINUING EDUCATION/PROFESSI	439			439
DUES AND SUBSCRIPTIONS	664			664
MARKETING AND MESSAGING	405			405
OFFICE SUPPLIES	413			413
PARKING	5			5
PAYROLL SERVICE FEES	700			700
POSTAGE AND SHIPPING	84			84
TELEPHONE AND INTERNET	960			960
WEBSITE DEVELOPMENT, HOSTING	2,274			2,274
MISCELLANEOUS	13,724			13,724
BAJA MEXICO INITIATIVES	184,465			184,465
GUATEMALA INITIATIVES	171,033			171,033
JUSTICE AND EQUITY INITITATIV	216,589			216,589
COMMUNITY AND YOUTH ENGAGEMEN	11,542			11,542
FISCAL SPONSORSHIP EXPENSE	216,289			216,289
TOTAL	\$ 820,694	\$ 0	\$ 0	\$ 820,694

Statement 6 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
EQUITIES MANAGED BY BAIRD EQUITIES MANAGED BY JP MORGAN	\$ 4,144,315 7,802,671	\$ 4,110,054 6,961,196	COST COST	\$ 4,765,128 8,195,316
TOTAL	\$ 11,946,986	\$ 11,071,250		\$ 12,960,444

Statement 7 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments

Description	Beginning	End of	Basis of	Fair Market
	of Year	Year	Valuation	Value
FIXED INCOME SECURITIES BAIRD FIXED INCOME SECURITIES JPM	\$ 1,417,315	\$ 1,322,231	COST	\$ 1,240,639
	1,293,243	1,383,585	COST	1,207,677
TOTAL	\$ 2,710,558	\$ 2,705,816		\$ 2,448,316

Statement 8 - Form 990-PF, Part II, Line 13 - Other Investments

Description	- E	Beginning of Year	 End of Year	Basis of Valuation	_	Fair Market Value
BETTER VENTURES II	\$	163,206	\$ 103,831	COST	\$	596,340
BETTER VENTURES III		162,940	173,717	COST		435,010
BLACKSTONE GSO		249,776	295,636	COST		296,159
HPS CORE SENIOR LENDING		159,972	147,423	COST		161,682
HPS CORE SENIOR LENDING OFFSHORE			108,186	COST		108,186
SVSS V PRIVATE INVESTORS OFFSHORE		62,500	 100,000	COST		108,241
TOTAL	\$	798,394	\$ 928,793		\$	1,705,618

Statement 9 - Form 990-PF, Part VIII-A, Line 1 - Summary of Direct Charitable Activities

Description

JUSTICE & EQUITY INITIATIVES IN BOULDER COUNTY, COLORADO COLLABORATING WITH NON-PROFIT AND GRASSROOTS ORGANIZATIONS TO ADDRESS THEMES OF IMMIGRANT RIGHTS, INDIGENOUS RIGHTS, CLIMATE JUSTICE, ECONOMIC JUSTICE, AND BIPOC YOUTH ENGAGEMENTS. OUR RESOURCES, INCLUDING STAFF SUPPORT/EXPERIENCE AND FUNDS, DIRECTLY BENEFITED MORE THAN 2,000 COMMUNITY MEMBERS VIA ADVOCACY AND ORGANIZING COALITION BUILDING, DIRECT SERVICES, EDUCATIONAL FORUMS, CONFERENCES, AND CAPACITY BUILDING MODULES. INCLUDES FISCAL SPONSORSHIPS FOR PROJECT, PROGRAM AND MOVEMENT DEVELOPMENT AND INNOVATION. INCLUDES: 135 PEOPLE DIRECTLY IMPACTED BY FINANCIAL HEALTH COURSE, WORKING WITH FOUR COMMUNITY PATNERS TO DELIVER; FISCAL SPONSORSHIP AND PARTNERSHIP WITH THE CLIMATE JUSTICE COLLABORATIVE OF BOULDER COUNTY.

Statement 10 - Form 990-PF. Part VIII-A. Line 2 - Summary of Direct Charitable Activities

Description

BAJA MEXICO INITIATIVES
PHILANTHROPIECE ASOCIACION CIVIL, B.C.S. MEXICO PROVIDES
TRAINING TO FORM COMMUNITY SAVINGS GROUPS WITH INTEGRATED
LEADERSHIP AND FINANCIAL EDUCATION PROGRAMMING ON TOPICS
SUCH AS PERSONAL BUDGETING, FINANCIAL GOALS AND DECISION
MAKING, CREDIT BASICS, SOCIAL ENTREPRENEURSHIP, AND
BUILDING COMMUNITY RESILIENCE. DIRECTLY SERVING 1,011
PEOPLE IN 42 COMMUNITIES IN 11 MEXICAN STATES; OVER 2,200
INDIRECT BENEFICIARIES. PROGRAMS FOCUS ON GENDER EQUITY
AND WORKING WITH COMMUNITY MEMBERS INDICATED AS HIGH RISK
(BASED ON EDUCATION, BASIC NEEDS, HEALTH, AND HOUSING
FACTORS).

Statement 11 - Form 990-PF, Part VIII-A, Line 3 - Summary of Direct Charitable Activities

Description

GUATEMALA INITIATIVES
FILANTROPIS ONG, CHAJUL GUATEMALA PROVIDES UNIVERSITY
SCHOLARSHIPS, A UNIVERSITY CREDIT PROGRAM, COMMUNITY
TRAININGS FOCUSED ON PERSONAL AND PROFESSIONAL DEVELOPMENT
AND SOCIAL ENTREPRENEURSHIP PRINCIPLES, AND ACCESS TO
INTERNET SERVICES. INCLUDES WORKSHOPS, MENTORING,
EDUCATIONAL TOURS, AND ATTENDANCE AT LOCAL AND NATIONAL
CONFERENCES AND EVENTS. DIRECTLY SERVING 35 UNIVERSITY
STUDENTS, 60 LOCAL YOUTH AND ENTREPENEURS, AND 150
HOUSEHOLDS IN 2022. ADDITIONALLY IMPACTING MORE THAN
1,500 MEMBERS OF INDIGENOUS MAYAN COMMUNITY VIA COMMUNITY
FORUMS, SOCIAL ACTIONS PROJECTS, AND LOCAL BUSINESS
SERVICES AND PRODUCTS.

Statement 12 - Form 990-PF, Part XIV, Line 2b - Application Format and Required Contents

Description

APPLICATIONS TO BE SUBMITTED IN PERSON. ATTENDANCE AT INFORMATION SESSION AND SUBSEQUENT ACADEMIC TESTING REQUIRED.

Statement 13 - Form 990-PF, Part XIV, Line 2c - Submission Deadlines

Description

APPLICATION PICKUP BY SEPTEMBER 30; APPLICATION DUE OCTOBER 16.

Statement 14 - Form 990-PF, Part XIV, Line 2d - Award Restrictions or Limitations

Description

APPLICANTS MUST BE FROM CHAJUL, HAVE EXCELLENT GRADES, AND DEMONSTRATE LEADERSHIP ABILITY AND A COMMITMENT TO POSITIVE COMMUNITY CHANGE.

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

Employer identification number

2022

PHILANTHROPIECE 84-1440983 FOUNDATION Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Employer identification number PHILANTHROPIECE FOUNDATION 84-1440983 Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
. <u>1</u>	ALPINE BANK 2375 CANYON BOULEVARD BOULDER CO 80302	\$ 6,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
. 2	EFAA 1575 YARMOUTH AVENUE BOULDER CO 80304	\$ 5,332	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
. 3	ROY AND LAURA MCCUTCHEN SCHWAB CHARITABLE 420 S ORANGE AVE ORLANDO FL 32862	\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	• •		7 7
No.	Name, address, and ZIP + 4 PRESTON WERNER FOUNDATION 314 LYTTON AVE	Total contributions	Person X Payroll Noncash (Complete Part II for
No. 4 (a)	PRESTON WERNER FOUNDATION 314 LYTTON AVE PALO ALTO CA 94301 (b)	\$ 10,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	PRESTON WERNER FOUNDATION 314 LYTTON AVE PALO ALTO CA 94301 (b) Name, address, and ZIP + 4 THE FUNDERS NETWORK 2000 PONCE DE LEON, STE 600	\$ 10,000 (c) Total contributions	Person X Payroll

Employer identification number

84-1440983

Form **2220**

Underpayment of Estimated Tax by Corporations

OMB No. 1545-0123

2022

Department of the Treasury Internal Revenue Service

PHILANTHROPIECE FOUNDATION

Name

Attach to the corporation's tax return.

Go to www.irs.gov/Form2220 for instructions and the latest information.

evenue Service Go to www.lrs.gov/Form2220 for Instructions and the latest Information

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

8, 0	on the estimated tax penalty line of the corporation's incor	me tax	return, but do not att	ach Form 2220.			
Pa	art I Required Annual Payment						
1	Total tax (see instructions)					1	4,211
	Personal holding company tax (Schedule PH (Form 112						
b	Look-back interest included on line 1 under section 460)(b)(2)	for completed long-ter	m			
	contracts or section 167(g) for depreciation under the ir	ncome	forecast method	2b			
С	Credit for federal tax paid on fuels (see instructions)			2c			
						2d	
3	Subtract line 2d from line 1. If the result is less than \$50				ion		
	does not owe the penalty		•	·		3	4,211
4	Enter the tax shown on the corporation's 2021 income tax reti	urn. Se	e instructions. Caution: I	If the tax is zero or			
	the tax year was for less than 12 months, skip this line and en					4	18,718
5	Required annual payment. Enter the smaller of line						
-	the amount from line 3		·		,	5	4,211
Pa	art II Reasons for Filing—Check the box				hecked.		
	Form 2220 even if it does not owe a			•	,		
6	The corporation is using the adjusted seasonal inst	_					
7	X The corporation is using the annualized income ins						
8	The corporation is a "large corporation" figuring its f			ed on the prior vear's	tax.		
Pa	art III Figuring the Underpayment		•	, ,			
			(a)	(b)	(0	c)	(d)
9	Installment due dates. Enter in columns (a) through (d) the 15th day						
	of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th						
	months of the corporation's tax year.	9	05/15/22	06/15/22	09/1	5/22	12/15/22
10	Required installments. If the box on line 6 and/or line 7 above is						
	checked, enter the amounts from Schedule A, line 38. If the box on						
	line 8 (but not 6 or 7) is checked, see instructions for the amounts to						
	enter. If none of these boxes are checked, enter 25% (0.25) of line 5						
	above in each column	10	1,053	0		0	856
11	Estimated tax paid or credited for each period. For column (a) only,						
	enter the amount from line 11 on line 15. See instructions	11	29,035				
	Complete lines 12 through 18 of one column before going to the						
	next column.						
12	Enter amount, if any, from line 18 of the preceding column	12		27,982		27,982	27,982
13	Add lines 11 and 12	13		27,982		27,982	27,982
14	Add amounts on lines 16 and 17 of the preceding column	14					
15	Subtract line 14 from line 13. If zero or less, enter -0-	15	29,035	27,982		27,982	27,982
16	If the amount on line 15 is zero, subtract line 13 from line 14.					-	
-	Otherwise, enter -0-	16		0		0	
17	Underpayment. If line 15 is less than or equal to line 10, subtract line						
·	15 from line 10. Then go to line 12 of the next column. Otherwise, go						
	to line 18	17	0	0		0	0
18	Overpayment. If line 10 is less than line 15, subtract line 10 from line						
•	15. Then go to line 12 of the next column	18	27,982	27,982		27,982	

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17—no penalty is owed. For Paperwork Reduction Act Notice, see separate instructions.

Form **2220** (2022)

F	Part IV Figuring the Penalty			T	T	T
			(a)	(b)	(c)	(d)
19	Enter the date of payment or the 15th day of the 4th month after					
	the close of the tax year, whichever is earlier. (C corporations with					
	tax years ending June 30 and S corporations: Use 3rd month					
	instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th					
	month instead of 4th month.) See instructions	19				
20	Number of days from due date of installment on line 9 to the date shown on line 19	20				
21	Number of days on line 20 after 4/15/2022 and before 7/1/2022	21				
	·					
22	Number of days on line 21 Underpayment on line 17 x 365 x 4% (0.04)	22	\$	\$	\$	\$
23	Number of days on line 20 after 6/30/2022 and before 10/1/2022	23				
24	Number of days on line 23 Underpayment on line 17 x 365 x 5% (0.05)	24	\$	\$	\$	\$
25	Number of days on line 20 after 9/30/2022 and before 1/1/2023	25				
26	Number of days on line 25 Underpayment on line 17 x 365 x 6% (0.06)	26	\$	\$	\$	\$
27	Number of days on line 20 after 12/31/2022 and before 4/1/2023	27				
28	Number of days on line 27 Underpayment on line 17 x 365 x 7% (0.07)	28	\$	\$	\$	\$
	Number of days on line 20 after 3/31/2023 and before 7/1/2023	29				
	Number of days on line 29 Underpayment on line 17 x 365 x *%	30	s	\$	\$	\$
	Number of days on line 20 after 6/30/2023 and before 10/1/2023	31				
٥.	·	31				
32	Number of days on line 31 Underpayment on line 17 x 365 x *%	32	\$	\$	\$	\$
33	Number of days on line 20 after 9/30/2023 and before 1/1/2024	33				
34	Number of days on line 33 Underpayment on line 17 x 365 x *%	34	\$	\$	\$	\$
35	Number of days on line 20 after 12/31/2023 and before 3/16/2024	35				
36	Number of days on line 35 Underpayment on line 17 x 366 x *%	36	\$	\$	\$	\$
37	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$	\$
38	Penalty. Add columns (a) through (d) of line 37. Enter line for other income tax returns	the t	otal here and on Form 1	1120, line 34; or the co	omparable	

*Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

Form **2220** (2022)

FOII	11 ZZZU (ZUZZ) PHILANIAKOPIECE		INDATION	04-1440.	903	raye 🕶
_P	art II Annualized Income Installm	ent N	Method			
			(a)	(b)	(c)	(d)
			First <u>2</u>	First <u>3</u>	First <u>6</u>	First 9
20	Annualization periods (see instructions)	20	months	months	months	months
21	Enter taxable income for each annualization period. See					
	instructions for the treatment of extraordinary items	21	0	-639	7,210	102,986
22	Annualization amounts (see instructions)	22	6.00000	4.00000	2.00000	1.33333
23a	Annualized taxable income. Multiply line 21 by line 22	23a		-2,556	14,420	137,314
b	Extraordinary items (see instructions)	23b				
С	Add lines 23a and 23b	23c		-2,556	14,420	137,314
24	Figure the tax on the amount on line 23c using the instructions					
	for Form 1120, Schedule J, line 2, or comparable line of					
	corporation's return	24		-36	200	1,909
25	Enter any alternative minimum tax (trusts only) for each payment					
	period (see instructions)	25				
26	Enter any other taxes for each payment period. See instructions	26				
27	Total tax. Add lines 24 through 26	27	18,718	-36	200	1,909
28	For each period, enter the same type of credits as allowed on					
	Form 2220, lines 1 and 2c. See instructions	28				
29	Total tax after credits. Subtract line 28 from line 27. If zero or					
	less, enter -0-	29	18,718	0	200	1,909
30	Applicable percentage	30	25%	50%	75%	100%
31	Multiply line 29 by line 30	31	4,680		150	1,909
P	art III Required Installments					·
	Note: Complete lines 32 through 38 of one column before		1st	2nd	3rd	4th
	completing the next column.		installment	installment	installment	installment
32	If only Part I or Part II is completed, enter the amount in each					
	column from line 19 or line 31. If both parts are completed, enter					
	the smaller of the amounts in each column from line 19 or line 31	32	4,680	0	150	1,909
33	Add the amounts in all preceding columns of line 38. See					
	instructions	33		1,053	1,053	1,053
34	Adjusted seasonal or annualized income installments.					
	Subtract line 33 from line 32. If zero or less, enter -0	34	4,680	0	0	856
35	Enter 25% (0.25) of line 5 on page 1 of Form 2220 in each					
	column. Note: "Large corporations," see the instructions for line					
	10 for the amounts to enter	35	1,053	1,053	1,053	1,052
36	Subtract line 38 of the preceding column from line 37 of the					
	preceding column	36			1,053 2,106	2,106
37	Add lines 35 and 36	37	1,053	1,053	2,106	3,158
	Required installments. Enter the smaller of line 34 or line 37					
	here and on page 1 of Form 2220, line 10. See instructions	38	1,053	0	0	856

Form **2220** (2022)

Form 2220		2022				
	For calendar	year 2022, or tax year beginr	ning ,	and ending		
Name					Employer Id	dentification Number
PHILANTHRO	PIECE FOU	JNDATION			84-144	0983
Due date of estima Amount of underpa	. ,	1st Quarter 05/15/22	2nd Quarter 06/15/22	3rd Quarter 09/15/2	<u>2</u>	4th Quarter 12/15/22
Prior year overpayr	ment applied	29,035				
Date of payment Amount of paymen	1st Pay t	ment 2nd Payme	ent 3rd Payment	4th Payı	ment	5th Payment

Form **8879-TE**

IRS e-file Signature Authorization for a Tax Exempt Entity

For calendar year 2022, or fiscal year beginning

....., 2022, and ending, 20

Do not send to the IRS. Keep for your records.

2022

Department of the Treasury Go to www.irs.gov/Form8879TE for the latest information. Internal Revenue Service Name of file FIN or SSN 84-1440983 PHILANTHROPIECE FOUNDATION Name and title of officer or person subject to tax ELIZABETH C. COOK PRESIDENT Part I Type of Return and Return Information Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only, If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I. 1a Form 990 check here b Total revenue, if any (Form 990, Part VIII, column (A), line 12) 1b 2a Form 990-EZ check here b Total revenue, if any (Form 990-EZ, line 9) _____ 2b 3a Form 1120-POL check here **b Total tax** (Form 1120-POL, line 22) b Tax based on investment income (Form 990-PF, Part V, line 5) 4b 4a Form 990-PF check here 5a Form 8868 check here b Balance due (Form 8868, line 3c) 5b 6a Form 990-T check here b Total tax (Form 990-T, Part III, line 4) 6b 7a Form 4720 check here 8a Form 5227 check here b FMV of assets at end of tax year (Form 5227, Item D) 8b 9a Form 5330 check here b Amount of credit payment requested (Form 8038-CP, Part III, line 22) 10b 10a Form 8038-CP check here Declaration and Signature Authorization of Officer or Person Subject to Tax Under penalties of perjury, I declare that X I am an officer of the above entity or I am a person subject to tax with respect to (name , (EIN) of entity) and that I have examined a copy of the 2022 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal. PIN: check one box only CORDER & MONTOYA, P.C. to enter my PIN 61920 as my signature l authorize KUNDINGER, FRO firm name on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. 11/03/23 Signature of officer or person subject to tax _ Certification and Authentication ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. 84679099799 Do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2022 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. KENNETH FICHTER 11/03/23 ERO's signature _